

Minutes of the meeting of the Finance Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, April 18, 2019 at the hour of 8:30 A.M., at 1950 W. Polk Street, in Conference Room 5301, Chicago, Illinois.

I. Attendance/Call to Order

Acting Chair Hammock called the meeting to order.

Present: Acting Chair M. Hill Hammock (Substitute Member) and Directors David Ernesto Munar and Mary B. Richardson-Lowry (3)

Directors Mary Driscoll, RN, MPH; Ada Mary Gugenheim; and Mike Koetting;

Absent: Chair Robert G. Reiter, Jr. and Director Hon. Dr. Dennis Deer, LCPC, CCFC (2)

Additional attendees and/or presenters were:

Ekerete Akpan – Chief Financial Officer
Jarrod Johnson, MBA, NHA, FACHE – Chief Operating Officer, Stroger Hospital and Central Campus
Charles Jones – Chief Procurement Officer
Terry Mason, MD – Cook County Department of Public Health
Jeff McCutchan –General Counsel

Leticia Reyes-Nash – Director of Programmatic Services and Innovation
Deborah Santana – Secretary to the Board
John Jay Shannon, MD – Chief Executive Officer
Robert Sumter, PhD, FACHE – Chief Information Officer

II. Public Speakers

Acting Chair Hammock asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

III. Action Items

A. Minutes of the Finance Committee Meeting, March 22, 2019

Director Richardson-Lowry, seconded by Director Munar, moved to accept the Minutes of the Finance Committee Meeting of March 22, 2019. THE MOTION CARRIED UNANIMOUSLY.

B. Contracts and Procurement Items (Attachment #1)

Charles Jones, Chief Procurement Officer, provided an overview of the contractual requests presented for the Committee's consideration. The following individuals provided additional information: Leticia Reyes-Nash, Director of Programmatic Services and Innovation; Terry Mason, MD, Chief Operating Officer, Cook County Department of Public Health; and Robert Sumter, PhD, FACHE, Chief Information Officer. The Committee reviewed and discussed the requests.

III. Action Items

B. Contracts and Procurement Items (continued)

The Committee discussed request number 1, which is a grant award for the Cook County Health Start Initiative. This initiative aims to help eliminate health disparities in Cook County by providing case management support for African American women aged 20-35 at risk for poor birth outcomes, along with their infants and father/partner in the targeted project area. In response to a question regarding outcome measures, Ms. Reyes-Nash indicated that she will provide a copy of the performance monitoring of the grant that is reported monthly to the Health Resources and Services Administration at the U.S. Department of Health and Human Services. Director Richardson-Lowry stated that, while she supports the notion of the grant's purpose, she cautioned that, as this is the third largest county health system in the nation, with one of the largest populations in this affected area, the grant funding is a small amount comparatively. Leveraging that funding will be a business imperative; she is hoping to hear through strategic planning and other avenues how these and other resources will be leveraged. The problem is clearly systemic, but this organization is in the best position, perhaps more than any other hospital system in the City, to address this. She is looking for something bigger, broader, comprehensive and systemic, that engages every aspect of this system.

Director Munar, seconded by Director Richardson-Lowry, moved the approval of request numbers 1 through 18, subject to completion of review by Contract Compliance, where appropriate. THE MOTION CARRIED UNANIMOUSLY.

C. Any items listed under Section III

IV. Report from Chief Procurement Officer

A. Report of emergency purchases

There were none reported.

V. Report from the Chief Financial Officer (Attachment #2)

- **Metrics**
- **Financials: February 2019**

Ekerete Akpan, Chief Financial Officer, provided an overview of the finance metrics. The Committee reviewed and discussed the information.

VI. Recommendations, Discussion / Information Item

A. Strategic planning discussion:

- **Capital Equipment (Attachment #3)**

Mr. Akpan provided an overview of the presentation, which included information on the following subjects:

VI. Recommendations, Discussion / Information Item

A. Strategic planning discussion (continued)

Impact 2020 Updates

- Definitions
- CCH trends Net Capital Assets, Additions and Depreciation Expenses
- Cook County Real Estate Asset Strategic Alignment Plan (REASRP)
- Capital Assets Purchases FY2016 – 2018
- Sources of Financing - Capital Assets Purchases FY2016 – 2018
- FY2019 Capital Planning Priorities
- FY 2019 Planned Capital Expenses

FY2020-2022 Environmental Scan

- Top Issues Confronting Hospitals
- Top Financial Challenges Facing Hospitals
- 2019 Credit Agencies Outlook and Common Themes
- FY2020 Capital Budget Planning Process
- FY2020-2022 Potential Funding Sources

Additional information was provided by Mr. Akpan regarding the financing of capital equipment through the County's capital plan. The County programs CCH needs into their bond issuance and, through the economies of scale and engaging the bond industry as the County of Cook, CCH gets their financing rate within the 4-5% range. That rate is definitely better than that using other financing vehicles. Irrespective of how the County funds CCH, that debt ultimately comes to CCH books as a charge. Going forward, increasingly CCH uses its operational dollars to buy capital equipment. Dr. John Jay Shannon, Chief Executive Officer, noted that CCH used to be the beneficiary of a separate capital budget line approved by the County Board; it was given to CCH parallel to its operating budget. That capital budget line in 2015, but it used to be a substantial source of funding.

Director Richardson-Lowry inquired regarding the outlook/comments referenced from the credit rating agency Standard & Poor's; she inquired whether their outlook ever deviated for not-for-profits. Mr. Akpan responded that he will check and provide the response through the Chair.

• Diagnostic / Specialty Services (Attachment #4)

Jarrold Johnson, MBA, NHA, FACHE, Chief Operating Officer of Stroger Hospital and Central Campus, provided an overview of the presentation, which included information on the following subjects:

- Overview of Departments
- Organizational Chart
- Impact 2020 Update – Status and Results
- FY2020-2022: The Future – Environmental Scan of Market, Best Practices and Trends
- Strengths, Weaknesses, Opportunities and Threats (SWOT) Analysis
- FY2020-2022 Future Recommendations
- Appendices

VI. Recommendations, Discussion / Information Item

A. Strategic planning discussion (continued)

Following the review and discussion of the information, Director Richardson-Lowry stated for the record that, as Stroger Hospital has been perceived as the hub for the System, she is encouraging a little more substance and detail to be built into this with respect to the plan, and more alignment from a strategic planning standpoint. From an operational imperative standpoint, typically there are connecting points, and there is a series of cascades associated with those connecting points; then it leads to what is happening with respect to how Stroger Hospital is relating to nursing, clinical, and other areas. Additionally, as an operational imperative, there is always going to be a financial impact, so that information should be included. Director Driscoll indicated that she is interested in seeing information on how CCH is planning to grow its diagnostic services - how they will be designed, which services will be chosen, and where they will be located.

VII. Adjourn

As the agenda was exhausted, Acting Chair Hammock declared the meeting
ADJOURNED.

Respectfully submitted,
Finance Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
M. Hill Hammock, Acting Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Deborah Santana, Secretary

Follow-up / Requests:

- Follow-up: A copy of recent performance monitoring relating to the grant award for the Cook County Health Start Initiative (request number 1 under Contracts and Procurement Items) will be provided to the Committee. Page 2
- Follow-up: Information relating to a historical perspective on Standard & Poor's outlook/comments on not-for-profits was requested. Page 3

Cook County Health and Hospitals System
Finance Committee Meeting
Thursday, April 18, 2019

ATTACHMENT #1

COOK COUNTY HEALTH AND HOSPITALS SYSTEM

ITEM III(B)

APRIL 18, 2019 FINANCE COMMITTEE MEETING

CONTRACTS AND PROCUREMENT ITEMS

Request #	Vendor/Entity	Service or Product	Fiscal impact not to exceed:	Method of acquisition	Total # of bidders/ RFP responses / GPO companies available	Affiliate / System	Begins on Page #
Accept Grant Award							
1	U.S. Department of Health and Human Services, Health Resources and Services Administration	Service - Healthy Start Initiative, Eliminating Racial/Ethnic Disparities	Grant award amount: \$4,870,000.00	n/a	n/a	System	4
2	Illinois Department of Public Health	Service - genetics education and follow-up	Grant award amount: \$128,000.00	n/a	n/a	CCDPH	5
3	Women Employed	Service - provide instructor training sessions using the Career Foundations Curriculum	Grant award amount: \$2,500.00	n/a	n/a	System	6
Accept Grant Award Increase							
4	Illinois Department of Human Services	Service - case management for high-risk infants	Grant award increase amount: \$116,100.00	n/a	n/a	CCDPH	7
Accept Grant Award Renewals							
5	Illinois Department of Public Health	Service - comprehensive health protection	Grant award renewal amount: \$3,295,620.50	n/a	n/a	CCDPH	8
6	Cook County Health Foundation	Service - providing MAT for opioid use disorder in the Cook County Department of Corrections	Grant award renewal amount: \$189,571.13	n/a	n/a	CHSCC	10
7	Illinois Department of Public Health	Service - pre-school vision and hearing screening	Grant award renewal amount: \$37,184.00	n/a	n/a	CCDPH	11

COOK COUNTY HEALTH AND HOSPITALS SYSTEM

ITEM III(B)

APRIL 18, 2019 FINANCE COMMITTEE MEETING

CONTRACTS AND PROCUREMENT ITEMS

Request #	Vendor/Entity	Service or Product	Fiscal impact not to exceed:	Method of acquisition	Total # of bidders/ RFP responses / GPO companies available	Affiliate / System	Begins on Page #
Increase Contracts							
8	STW Healthcare, LLC	Service - temporary staffing for Radiology and Pharmacy, various departments	\$1,500,000.00	This request - noncompetitive process leveraging existing contract	Original contract competitive RFP process in 2017/9 responses)	System	12
9	The Board of Trustees of the University of Illinois, on behalf of the University of Illinois Hospital & Health Sciences System (UI Health)	Service - oncology surgeon services	\$600,000.00	Sole Source	n/a	System	13
Extend and Increase Contract							
10	Universal Protection Service, LLC, d/b/a Allied Universal Security Services	Service - security services at ACHN clinics and other CCH facilities	\$1,145,000.00	This request - noncompetitive process leveraging existing contract	Original contract competitive RFP process in 2016/4 responses)	System	14
Negotiate and Execute Contract							
11	Mpulse	Service - interactive text communications with members	\$976,607.00	RFP	3	Managed Care	15
Execute Contracts							
12	CDW Government, LLC	Service - software licensing	\$7,421,500.12	GPO	3	System	16
13	CDW Government	Product - information technology hardware and equipment	\$4,140,000.00	GPO	3	System	17
14	Stryker Craniomaxillofacial	Product - craniomaxillofacial implants, instruments, equipment and supplies	\$3,000,000.00	RFP	3	System	18

COOK COUNTY HEALTH AND HOSPITALS SYSTEM

ITEM III(B)

APRIL 18, 2019 FINANCE COMMITTEE MEETING

CONTRACTS AND PROCUREMENT ITEMS

Request #	Vendor/Entity	Service or Product	Fiscal impact not to exceed:	Method of acquisition	Total # of bidders/ RFP responses / GPO companies available	Affiliate / System	Begins on Page #
Execute Contracts (continued)							
15	CDW Government, LLC	Service - maintenance and support	\$703,918.68	GPO	3	System	19
16	Global Healthcare Exchange (GHX)	Service - software subscription and support for electronic requisitioning software suite, contract center and vendor credentialing	\$557,744.73	GPO	1	System	20
17	FormFast, LLC	Service - software licensing, maintenance and support	\$161,520.00	Sole Source	n/a	System	21
Approval of Payment							
18	Alliance Insurance Services	For the purchase of re-insurance for CountyCare members for calendar year 2019 (coverage to be provided by Sequoia)	\$3,571,200.00	Issued under a County-wide insurance brokerage contract		Managed Care	22

Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: Leticia Reyes-Nash, Director of Programmatic Services		EXECUTIVE SPONSOR: Debra Carey, Deputy Chief Executive Officer, Operations	
DATE: 04/10/2019		PRODUCT / SERVICE: Service - Healthy Start Initiative, Eliminating Racial/Ethnic Disparities	
TYPE OF REQUEST: Accept Grant Award		VENDOR / SUPPLIER: U.S. Department of Health and Human Services, Health Resources and Services Administration, Washington, D.C.	
ACCOUNT:	FISCAL IMPACT NOT TO EXCEED: N/A	GRANT FUNDED / RENEWAL AMOUNT: \$4,870,000.00	
CONTRACT PERIOD: 04/01/2019 thru 03/31/2024		GRANT AWARD NUMBER: H49MC32723	
COMPETITIVE SELECTION METHODOLOGY: NA			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

No prior history for this grant.

NEW PROPOSAL JUSTIFICATION:

This is a request to accept a new grant award for the Healthy Start Initiative, Eliminating Racial/Ethnic Disparities. The Cook County Healthy Start Initiative (CCHSI) project aims to help eliminate perinatal health disparities in Cook County by providing case management support for African American women aged 20-35 at risk for poor birth outcomes, along with their infants and father/partners in the targeted project area, urban communities within Cook County, Illinois. The program will work to identify and recruit African American women into early and adequate prenatal care, reduce the percentage of low birth weight and preterm infants, and link participants to the network of services they need.

By strengthening CCH's prenatal health delivery system and establishing a new model of comprehensive prenatal health care services across points of entry, we aim to ameliorate the disparate outcomes for high-risk pregnant African American women that result in maternal and infant mortality, low-birth weight, and pre-term births.

TERMS OF REQUEST:

This is a request to accept a grant award in an amount not to exceed \$4,870,000.00, as needed, for a sixty (60) month period from 04/01/2019 through 03/31/2024.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: N/A

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

1

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
• John H. Stroger, Jr. Hospital of Cook County • Oak Forest Health Center • Provident Hospital • Ruth M.
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Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, MD, Chief Operating Officer, Cook County Department of Public Health (CCDPH)	
DATE: 04/08/2019		PRODUCT / SERVICE: Service - Genetics Education and Follow-up	
TYPE OF REQUEST: Accept Grant Award		VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, IL	
FISCAL IMPACT / ACCOUNT: *9481801		GRANT FUNDED /RENEWAL AMOUNT: \$128,000.00	
CONTRACT PERIOD: 07/01/2018 thru 06/30/2020		GRANT AWARD NUMBER: 93708205G	
COMPETITIVE SELECTION METHODOLOGY: [BID / RFP / GPO] N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: [SOLE SOURCE] N/A			

PRIOR CONTRACT HISTORY:

On 09/29/2017 grant award number 93708205G was approved by the Cook County Health (CCH) Board of Directors in the amount of \$64,000.00 for a twelve (12) month period from 7/01/2017 thru 06/30/2018.

NEW PROPOSAL JUSTIFICATION:

As a state certified health department in the State of Illinois, the Cook County Department of Public Health (CCDPH) is mandated to support referral services to a population of newborns, children, and adults whose genetic condition necessitates coordinated health care services. This includes families identified as suspect for, or confirmed with a genetic disorder found as a result of newborn screening and those families who have experienced a sudden infant death.


*The cost of early termination of this grant is \$0.00.

TERMS OF REQUEST:

This is a request to accept grant award number 93708205G in an amount not to exceed \$128,000.00, as needed, for a twenty-four (24) month period from 07/01/2018 thru 06/30/2020.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: N/A

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, MD, Chief Executive Officer

APPROVED

APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

2

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
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BOARD APPROVAL REQUEST

SPONSOR: Leticia Reyes-Nash, Director of Programmatic Services		EXECUTIVE SPONSOR: Debra Carey, Deputy Chief Executive Officer, Operations	
DATE: 04/10/2019		PRODUCT / SERVICE: Service - Provide Instructor Training Sessions Using the Career Foundation Curriculum	
TYPE OF REQUEST: Accept Grant Award		VENDOR / SUPPLIER: Women Employed, Chicago, IL	
ACCOUNT: FISCAL IMPACT NOT TO EXCEED:		GRANT FUNDED /RENEWAL AMOUNT: \$2,500.00	
CONTRACT PERIOD: 03/01/2019 thru 09/30/2019		GRANT AWARD NUMBER: N/A	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

No prior history for this grant.

NEW PROPOSAL JUSTIFICATION:

This is a Memorandum of Understanding (MOU) between CCH and Women Employed. Under this MOU, CCH will receive the Career Foundations Curriculum and a stipend to provide career training to twenty-five (25) students as part of CCH's Workforce Development Initiative.

TERMS OF REQUEST:

This is a request to accept a grant award in an amount not to exceed \$2,500.00, as needed, for a period of seven (7) months from 03/01/2019 through 09/30/2019.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: N/A

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer

APPROVED**APR 26 2019****BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM****Request #****3**

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Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, MD, Chief Operating Officer, Cook County Department of Public Health (CCDPH)	
DATE: 04/10/2019		PRODUCT / SERVICE: Service –Case Management for High-Risk Infants	
TYPE OF REQUEST: Increase Grant Award		VENDOR / SUPPLIER: Illinois Department of Human Services, Springfield, Illinois	
ACCOUNT *9741806-53497		GRANT FUNDED / RENEWAL AMOUNT: \$116,100.00	
CONTRACT PERIOD: 07/01/2018 thru 06/30/2019		GRANT AWARD NUMBER: FCSXU05024	
COMPETITIVE SELECTION METHODOLOGY: [BID / RFP / GPO] N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: [SOLE SOURCE] N/A			

PRIOR CONTRACT HISTORY:

Grant award number FCSXU05024 was approved by the Cook County Health (CCH) Board of Directors on 08/31/2018 for a period of twelve (12) months from 07/01/2018 thru 06/30/2019 in the amount of \$540,000.00.

NEW PROPOSAL JUSTIFICATION:

The Illinois Department of Human Services (IDHS) increased the grant for the High Risk Infant Follow-Up Program for FY19. IDHS reviewed current documentation and based on the average achieved caseload, adjusted the assigned caseload to better reflect the population currently being served. As a certified health department in the State of Illinois, the Cook County Department of Public Health (CCDPH) is mandated to provide case management services to high-risk infants identified through the Adverse Pregnancy Outcome Reporting System (APORS), and special needs children.

*The cost of early termination of this grant is \$270,000.00.

TERMS OF REQUEST:

This is a request to increase grant award number FCSXU05024 in an amount not to exceed \$116,100.00 for the remainder of the contract period through 06/30/2019.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: N/A

CCH CFO:

Ekerete Akpan, Chief Financial Officer

CCH CEO:

John Jay Shannon, M.D., Chief Executive Officer

APPROVED

APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

4

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BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, MD, Chief Operating Officer, Cook County Department of Public Health (CCDPH)	
DATE: 04/10/2019		PRODUCT / SERVICE: Service –Comprehensive Health Protection	
TYPE OF REQUEST: Grant Award Renewal		VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, IL	
ACCOUNT FISCAL / IMPACT: * N/A		GRANT FUNDED /RENEWAL AMOUNT: \$3,295,620.50	
CONTRACT PERIOD: 07/01/2018 thru 06/30/2019		GRANT AWARD NUMBER: 95080017G	
COMPETITIVE SELECTION METHODOLOGY: [BID / RFP / GPO] N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: [SOLE SOURCE] N/A			

PRIOR CONTRACT HISTORY:

The IDPH Vector Surveillance and Control Grant was approved by the CCH Board of Directors on 10/27/17 for a twelve (12) month period from 07/01/2017 thru 06/30/2018 in the amount of \$490,888.00.

The IDPH Ground Water Program was approved by the CCH Board of Directors on 01/26/2018 for a twelve (12) month period from 10/01/2017 thru 09/30/2018 in the amount of \$18,000.00. The IDPH Local Health Protection Program was approved by the CCH Board of Directors on 01/26/2018 for a twelve (12) month period from 07/01/2017 thru 06/30/2018 in the amount of \$2,239,551.00.

The IDPH Lead Poisoning Case Management with Environmental Inspections Grant was approved by the CCH Board of Directors on 03/02/2018 for a twelve (12) month period from 07/01/2017 thru 06/30/2018 in the amount of \$171,800.00.

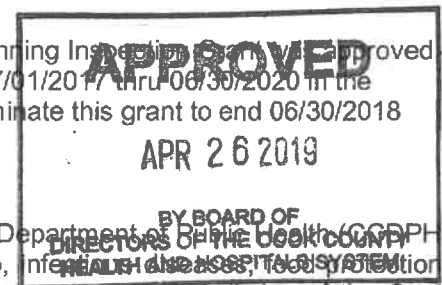
Previous awards were granted separately as follows: The IDPH Body Art & Tanning Inspection Program was approved by the CCH Board of Directors on 03/29/2018 for thirty-six (36) months from 07/01/2017 thru 06/30/2020 in the amount of \$88,125.00. The Illinois Department of Public Health decided to terminate this grant to end 06/30/2018 and renew the Comprehensive Health Protection Grant.

NEW PROPOSAL JUSTIFICATION:

As a state certified health department in the State of Illinois, the Cook County Department of Public Health (CCDPH) is mandated to provide health protection services including, but not limited to, infectious diseases, food inspection, potable (drinking) water, and sewage disposal in suburban Cook County areas under the jurisdiction of the Cook County Department of Public Health.

Award for FY2019 has been combined to include the following grants: IDPH/Body Art Program in the amount of \$50,212.50; IDPH Ground Water Program in the amount of \$18,000.00; the IDPH Local Health Protection Grant in the amount of \$2,239,551.00; the IDPH Lead Poisoning Prevention and Response Program in the amount of \$566,800.00; the IDPH Tanning Program in the amount of \$9,600.00 and the IDPH Vector Surveillance and Control Program in the amount of \$411,457.00.

*The cost of the early termination of this grant is estimated at \$1,046,847.15.



Request #

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Page 1 of 2

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DATE: 04/10/2019		PRODUCT / SERVICE: Service –Comprehensive Health Protection	
TYPE OF REQUEST: Grant Award Renewal		VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, IL	
ACCOUNT FISCAL / IMPACT: * N/A		GRANT FUNDED /RENEWAL AMOUNT: \$3,295,620.50	
CONTRACT PERIOD: 07/01/2018 thru 06/30/2019		GRANT AWARD NUMBER: 95080017G	

TERMS OF REQUEST:

This is a request to accept grant award number 95080017G in an amount not to exceed \$3,295,620.50, as needed, for a period of twelve (12) months from 07/01/2018 thru 06/30/2019.

CCH CFO:

Ekerete Akpan, Chief Financial Officer

CCH CEO:

John Jay Shannon, MD, Chief Executive Officer

BOARD APPROVAL REQUEST

SPONSOR: Leticia Reyes-Nash, Director of Programmatic Services		EXECUTIVE SPONSOR: Debra Carey, Deputy Chief Executive Officer, Operations	
DATE: 04/10/2019		PRODUCT / SERVICE: Service - Providing MAT for Opioid Use Disorder in the Cook County Jail	
TYPE OF REQUEST: Accept Grant Renewal		VENDOR / SUPPLIER: Cook County Health Foundation, Chicago, Chicago, IL	
ACCOUNT: FISCAL IMPACT NOT TO EXCEED: <div style="text-align: right;">\$189,571.13</div>		GRANT FUNDED /RENEWAL AMOUNT: <div style="text-align: right;">\$189,571.13</div>	
CONTRACT PERIOD: 01/01/2019 thru 12/31/2019		CONTRACT NUMBER: N/A	
COMPETITIVE SELECTION METHODOLOGY: N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: N/A			

PRIOR CONTRACT HISTORY:

On 03/29/2018 the Cook County Health (CCH) Board of Directors approved a sub grant agreement with the Cook County Health Foundation (CCHF)/PHIMC in the amount of \$189,571.13 for a six (6) month period from 07/01/2018 through 12/31/2018 to provide Medication Assisted Treatment (MAT) within the Cook County Jail.

NEW PROPOSAL JUSTIFICATION:

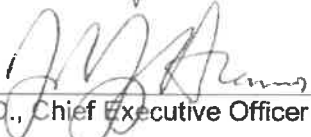
This grant agreement is supported by funds received from the Public Health Institute of Metropolitan Chicago (PHIMC), for the Chicago Department of Public Health's Expansion and Enhancement of Medication-Assisted Treatment for Opioid Use Disorder. CCH will continue to expand Medication-Assisted Treatment (MAT) access for opioid use disorder within the Cook County Jail.

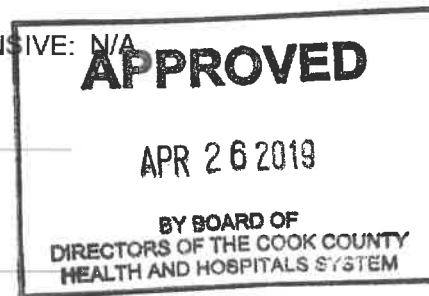
TERMS OF REQUEST:

This is a request to accept a grant renewal in an amount not to exceed \$189,571.13, as needed, for a period of twelve (12) months from 01/01/2019 through 12/31/2019.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: N/A

CCH CFO: 
 Ekerete Akpan, Chief Financial Officer

CCH CEO: 
 John Jay Shannon, M.D., Chief Executive Officer



Request #

6

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Terry Mason, MD, Chief Operating Officer, Cook County Department of Public Health (CCDPH)	
DATE: 04/10/2019	PRODUCT / SERVICE: Service – Pre-school Vision and Hearing Screening		
TYPE OF REQUEST: Grant Contract Renewal	VENDOR / SUPPLIER: Illinois Department of Public Health, Springfield, Illinois		
FISCAL IMPACT / ACCOUNT: *9691801		GRANT FUNDED AMOUNT: \$37,184.00	
CONTRACT PERIOD: 07/01/2018 thru 06/30/2019		CONTRACT NUMBER: 93788410G	
COMPETITIVE SELECTION METHODOLOGY: [BID / RFP / GPO] N/A			
NON-COMPETITIVE SELECTION METHODOLOGY: [SOLE SOURCE] N/A			

PRIOR CONTRACT HISTORY:

On 10/27/2017 the Cook County Health Board of Directors approved a grant contract with the Illinois Department of Public Health, Office of Health Promotion for pre-school vision and hearing screening in the amount of \$37,184.00 for a twelve (12) month period from 07/01/2017 through 06/30/2018.

NEW PROPOSAL JUSTIFICATION:

As a state certified health department in the State of Illinois, the Cook County Department of Public Health (CCDPH) receives funding to provide vision and hearing screening services. Preschool children three (3) years of age and older in licensed childcare facilities are given priority to ensure full participation in the educational environment. Children that fail their initial screenings are rescreened. Children identified with vision/hearing deficiencies at the rescreen are referred for diagnostic evaluation and intervention. This program is not mandated.

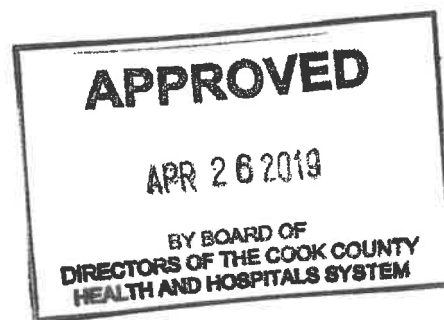
*The cost of early termination of this grant is \$0.00.

TERMS OF REQUEST:

This is a request to accept Grant Contract Number 93788410G in an amount not to exceed \$37,184.00, as needed, from 07/01/2018 thru 06/30/2019.

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, MD, Chief Executive Officer



Request #

7

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Revised 03/01/2011

Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Jarrod G. Johnson, Chief Operating Officer, Hospital Based Services	
DATE: 04/10/2019		PRODUCT / SERVICE: Service – Temporary Staffing for Radiology and Pharmacy, Various Departments	
TYPE OF REQUEST: Increase Contract		VENDOR / SUPPLIER: STW Healthcare, LLC, Hazel Crest, IL	
ACCOUNT: 521005	FISCAL IMPACT NOT TO EXCEED: \$1,500,000.00	GRANT FUNDED /RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 12/01/2017 thru 11/30/2020		CONTRACT NUMBER: H18-25-114	
COMPETITIVE SELECTION METHOD			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: RFP (2017-9)			

PRIOR CONTRACT HISTORY:

On 12/15/2017 the Cook County Health (CCH) Board approved contract number H18-25-114 for a period of thirty-six (36) months from 12/01/2017 through 11/30/2020 in the amount of \$3,785,430.00. An Amendment was executed on 10/18/2018 by the Office of Supply Chain Management to update the scope of work to include dental billing specialists. On 01/25/2019 the CCH Board approved a request to increase contract by \$525,000.00 for additional departments.

NEW PROPOSAL JUSTIFICATION:

This is a request to provide interim staffing for various (Radiology, Pharmacy, Sterile Processing, Endoscopy, Dialysis Ambulatory Services, Facilities, Laboratory, Revenue Cycle and CCDPH) departments within CCH, until vacancies can be filled.

TERMS OF REQUEST:

This request is to increase contract number H18-25-114 in an amount not to exceed \$1,500,000.00, as needed, for the remainder of the contract period through 11/30/2020.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT TO BE RESPONSIVE: Pending

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #
8

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Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: Richard Keen, M.D. Chairman, Department of Surgery		EXECUTIVE SPONSOR: Claudia M. Fegan, M.D., Chief Medical Officer	
DATE: 04/08/2019	PRODUCT / SERVICE: Service – Oncology Surgeon Services		
TYPE OF REQUEST: Increase Contract	VENDOR / SUPPLIER: The Board of Trustees of the University of Illinois on Behalf of the University of Illinois Hospital & Health Sciences System (UI Health), Chicago, IL		
ACCOUNT: 521024	FISCAL IMPACT NOT TO EXCEED: \$600,000.00	GRANT FUNDED /RENEWAL AMOUNT: N/A	
ORIGINAL CONTRACT PERIOD: 12/01/2016 thru 05/31/2021		CONTRACT NUMBER: H17-25-048	
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: Sole Source			

PRIOR CONTRACT HISTORY:

On 03/31/2017 the Cook County Health (CCH) Board of Directors approved contract number H17-25-048 in the amount of \$752,000.00 for a period of eighteen (18) months from 12/01/2016 thru 5/31/2018. On 07/27/2018 the CCH Board approved a request to extend the contract by thirty-six (36) months from 06/01/2018 through 05/31/2021 and increase it by \$1,504,999.80.

NEW PROPOSAL JUSTIFICATION:

This request will add breast oncology and surgical oncology surgeon services and implement accreditation with the National Accreditation Program for Breast Cancer (NAPBC) for CCH.

TERMS OF REQUEST:

This is a request to increase contract number H17-25-048 in an amount not to exceed \$600,000.00, as needed, for the remainder of the contract period through 05/31/2021.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer

APPROVED

APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

9

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BOARD APPROVAL REQUEST

SPONSOR: Cynthia Coleman, Director of Financial Control, Ambulatory Services		EXECUTIVE SPONSOR: Iliana A. Mora, Chief Operating Officer, Ambulatory Services	
DATE: 04/04/2019		PRODUCT / SERVICE: Service - Security Services at ACHN Clinics and other CCH Facilities	
TYPE OF REQUEST: Extend and increase Contract		VENDOR / SUPPLIER: Universal Protection Service, LLC, d/b/a Allied Universal Security Services, Northbrook, IL	
ACCOUNT: 520830		FISCAL IMPACT NOT TO EXCEED: \$1,145,000.00	GRANT FUNDED / RENEWAL AMOUNT: N/A
ORIGINAL CONTRACT PERIOD: 08/01/2016 thru 07/31/2019		REVISED CONTRACT PERIOD: 08/01/2019 thru 07/31/2020	CONTRACT NUMBER: H16-25-071
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: RFP (2016-4)			

PRIOR CONTRACT HISTORY:

Contract number H16-25-071 was approved by the Cook County Health (CCH) Board of Directors on 06/24/2016 in the amount of \$6,995,000.00 for a thirty-six (36) month period from 08/01/2016 through 07/31/2019. On 03/31/2017 and amendment was approved by the CCH Board to add services at Oak Forest Health Center in the amount of \$1,089,049.50 for the remainder of the contract period. On 05/24/2018 the Office of Supply Chain Management executed an Amendment to revise the provisions of the contract through the remainder of the contract period.

NEW PROPOSAL JUSTIFICATION:


This request is to execute the first of two renewal options. This vendor provides security services at ACHN Clinics, Provident Hospital, and Oak Forest Health Center.

TERMS OF REQUEST:

This is a request to extend and increase contract number H16-25-071 in an amount not to exceed \$1,145,000.00, as needed, for a twelve (12) month period from 08/01/2019 thru 07/31/2020.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer

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APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #
10

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BOARD APPROVAL REQUEST

SPONSOR: Esther Macchione, Director of Operations, Managed Care	EXECUTIVE SPONSOR: James Kiamos, Chief Executive Officer, CountyCare
DATE: 04/01/2019	PRODUCT / SERVICE: Service - Interactive Text Communications with Members
TYPE OF REQUEST: Negotiate and Execute Contract	VENDOR / SUPPLIER: MPulse, Eugene OR
ACCOUNT: 520675 FISCAL IMPACT NOT TO EXCEED: \$ 976,607.00	GRANT FUNDED / RENEWAL AMOUNT:
CONTRACT PERIOD: 04/01/2019 thru 03/31/2022	CONTRACT NUMBER: H19-25-041
<input checked="" type="checkbox"/> COMPETITIVE SELECTION METHODOLOGY: RFP (3)	
<input type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY:	

PRIOR CONTRACT HISTORY:

There is no prior history for this service.

NEW PROPOSAL JUSTIFICATION:

This request is for the provision of interactive texting services to CountyCare members regarding their eligibility and redetermination by communicating with them on their cell phones and, when needed, via email. Vendor will also be used as part of the Quality Management Program, by providing plan communications with members via interactive text messaging. Texts in this context will target members of ages, genders or diagnoses who require preventive services and are eligible for Member Incentives or Added Benefits under these programs. The contract language includes two (2) one-year renewal options.

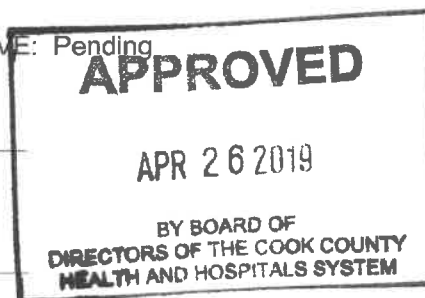
TERMS OF REQUEST:

This is a request to approve negotiation and execution of contract number H19-25-041 in an amount not to exceed \$976,607.00, as needed, for a period of thirty-six (36) months from 04/01/2019 through 03/31/2022.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #
11

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BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Robert L. Sumter, Ph.D., Chief Information Officer	
DATE: 04/08/2019		PRODUCT / SERVICE: Service - Software Licensing	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: CDW Government, LLC, Vernon Hills, IL	
ACCOUNT: 520830	FISCAL IMPACT NO TO EXCEED: \$7,421,500.12	GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 06/01/2019 thru 05/31/2022		CONTRACT NUMBER: H19-25-039	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: GPO (3)		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

Contract number H16-25-085 was approved by the Cook County Health (CCH) Board of Directors on 05/27/2016 in the amount of \$5,606,391.27 for a thirty-six (36) month period from 06/01/2016 through 05/31/2019.

NEW PROPOSAL JUSTIFICATION:

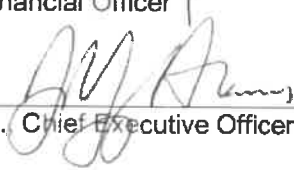
The Microsoft Enterprise Agreement (EA) provides CCH software licensing, email/calendaring, remote conference communications, and other collaboration solutions which are vital to continued successful business operations. This request includes updated licenses for Microsoft Windows, Office 365, Azure storage for Backups and Disaster Recovery, and adds licenses to enable encryption of all CCH workstations. This request also includes the cost of changes in Microsoft environment due to the additional growth in overall user count.

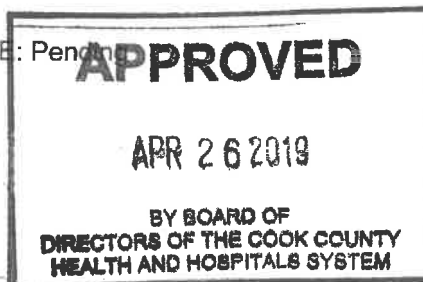
TERMS OF REQUEST:

This is a request to execute contract number H19-25-039 in an amount not to exceed \$7,421,500.12, as needed, for a thirty-six (36) month period from 06/01/2019 thru 05/31/2022.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO: 
Ekerete Akpan, Chief Financial Officer

CCHHS CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #
12

Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Robert L. Sumter, Ph.D., Chief Information Officer	
DATE: 04/08/2019		PRODUCT / SERVICE: Product - IT Hardware & Equipment	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: CDW Government, Vernon Hills, IL	
ACCOUNT: 520830	FISCAL IMPACT NO TO EXCEED: \$4,140,000.00	GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: One Time Purchase- Capital Equipment		CONTRACT NUMBER: H19-25-038	
X	COMPETITIVE SELECTION METHODOLOGY: GPO-(3)		
	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

There is no prior contract history for this request.

NEW PROPOSAL JUSTIFICATION:

This is a request to purchase desktop, network and audio visual equipment necessary for multiple site moves as follows:

1. Cook County Health at Matteson - (Formally Oak Forest Finance and Call Center)
\$800,000.00
2. Cook County Health at Hillside - (Formally Oak Forest Cook County Department of Public Health)
\$830,000.00
3. Cook County Health at North Riverside - (Formally Cicero Clinic)
\$710,000.00
4. Cook County Health at Hanson Park - (Formally Logan Square Clinic)
\$725,000.00
5. Cook County Health at Blue Island - (Formally Oak Forest Clinic)
\$1,075,000.00

TERMS OF REQUEST:

This is a request to execute contract number H19-25-038 in an amount not to exceed \$4,140,000.00, as needed, for a one-time purchase.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO:

Ekerete Akpan, Chief Financial Officer

CCH CEO:

John Jay Shannon, M.D., Chief Executive Officer

Request #

13

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BOARD APPROVAL REQUEST

SPONSOR: Richard Keen, M.D., Chairman, Department of Surgery		EXECUTIVE SPONSOR: Claudia M. Fegan, M.D., Chief Medical Officer	
DATE: 04/10/2019		PRODUCT / SERVICE: Product - Craniomaxillofacial Implants, Instruments, Equipment and Supplies	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Stryker Craniomaxillofacial, Portage, MI	
ACCOUNT: 530840		FISCAL IMPACT NOT TO EXCEED: \$3,000,000.00	
CONTRACT PERIOD: 04/01/2019 thru 03/31/2022		GRANT FUNDED / RENEWAL AMOUNT: N/A	
		CONTRACT NUMBER: H19-25-036	
COMPETITIVE SELECTION METHODOLOGY			
X RFP (3)			
NON-COMPETITIVE SELECTION METHODOLOGY:			

PRIOR CONTRACT HISTORY:

Contract number H14-25-095 was approved by the Cook County Health (CCH) Board of Directors on 11/14/2014 in the amount of \$585,000.00 for Craniomaxillofacial (CMF) implants and instruments from 11/01/2014 through 10/31/2015. Amendments approved by the CCH Board of Directors and executed by the Office of Supply Chain Management increased it in the amount of \$4,018,388.00 and extended the contract through 04/30/2019.

NEW PROPOSAL JUSTIFICATION:

This request is for the purchase of craniomaxillofacial implants, instruments, equipment and supplies used in surgeries and ensures the availability of all sizes and types required to treat patients with various needs throughout CCH

TERMS OF REQUEST:

This is a request to execute contract number H19-25- 036 in an amount not to exceed \$3,000,000.00, as needed, for thirty-six (36) month period from 04/01/2019 thru 03/31/2022.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE

Pen

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APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

CCH CFO:

Ekerete Akpan, Chief Financial Officer

CCH CEO:

John Jay Shannon, M.D., Chief Executive Officer

Request #

14

• Ambulatory & Community Health Network • Cermak Health Services • Department of Public Health •
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Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Robert L. Sumter, Ph.D., Chief Information Officer	
DATE: 04/10/2019		PRODUCT / SERVICE: Service - Maintenance & Support	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: CDW Government, LLC, Vernon Hills, IL	
ACCOUNT: 520830	FISCAL IMPACT NO TO EXCEED: \$703,918.68	GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 06/01/2019 thru 05/31/2022		CONTRACT NUMBER: H19-25-040	
<input checked="" type="checkbox"/> COMPETITIVE SELECTION METHODOLOGY: GPO (3)			
<input type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY:			

PRIOR CONTRACT HISTORY:

Contract number H16-25-086 was approved by the Cook County Health (CCH) Board of Directors on 05/27/2016 in the amount of \$530,865.81 for a thirty-six (36) month period from 06/01/2016 through 05/31/2019.

NEW PROPOSAL JUSTIFICATION:

This request includes a provision for Microsoft Server Core Enrollment (SCE), which will continue to provide coverage of licenses and the products CCH requires to address compliance needs for full email/calendar archiving, Business Intelligence in-house development, SQL database and server licensing. The agreement covers CCH's rapid growth in virtualization of server and storage infrastructure. It also includes new licenses to cover the increase in user load across CCH systems.

TERMS OF REQUEST:

This is a request to execute contract number H19-25-040 in an amount not to exceed \$703,918.68, as needed, for a thirty-six (36) month period from 06/01/2019 thru 05/31/2022.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO:

Ekerete Akpan, Chief Financial Officer

CCHHS CEO:

John Jay Shannon, M.D., Chief Executive Officer

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APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #
15

Cook County Health

BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Charles A. Jones, Chief Procurement Officer	
DATE: 04/08/2019		PRODUCT / SERVICE: Service – Software Subscription and Support for Electronic Requisitioning Software Suite, Contract Center and Vendor Credentialing.	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: Global Healthcare Exchange (GHX), Denver CO	
ACCOUNT: 520830		FISCAL IMPACT NOT TO EXCEED: \$557,744.73	GRANT FUNDED / RENEWAL AMOUNT: N/A
CONTRACT PERIOD: 07/01/2019 thru 06/30/2022		CONTRACT NUMBER: H19-25-025	
<input checked="" type="checkbox"/>	COMPETITIVE SELECTION METHODOLOGY: GPO (1)		
<input type="checkbox"/>	NON-COMPETITIVE SELECTION METHODOLOGY:		

PRIOR CONTRACT HISTORY:

Contract number H16-25-096 was approved by the Cook County Health (CCH) Board of Directors on 06/24/2016 in the amount of \$1,049,915.00 for a period of thirty-six (36) months from 07/01/2016 through 06/30/2019.

NEW PROPOSAL JUSTIFICATION:


This request will allow SCM to continue to support its current implementation of the GHX software tool set, including Procurement Suite (electronic requisitioning) which required the customization of interfaces to Oracle (the County's ERP system). It will also allow SCM to maintain its use of the GHX Contract Center (contract repository) and continue the maintenance and support of the Business Solutions-Contract Pricing Optimization Program, Connect Plus & Nuvia (data cleanse) subscriptions.

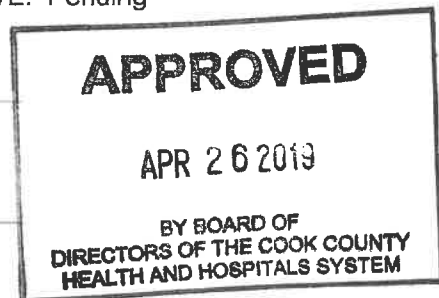
TERMS OF REQUEST:

This is a request to execute contract number H19-25-025 in an amount not to exceed \$557,744.73, as needed, for a period of thirty-six (36) months from 07/01/2019 thru 06/30/2022.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO: 
Ekerete Akpan, Chief Finance Officer

CCH CEO: 
John Jay Shannon, M.D., Chief Executive Officer



Request #
16

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BOARD APPROVAL REQUEST

SPONSOR: N/A		EXECUTIVE SPONSOR: Robert L. Sumter, Ph.D., Chief Information Officer	
DATE: 04/10/2019		PRODUCT / SERVICE: Service - Software Licensing, Maintenance & Support	
TYPE OF REQUEST: Execute Contract		VENDOR / SUPPLIER: FormFast, LLC, Ridgeway, PA	
ACCOUNT: 520830	FISCAL IMPACT NO TO EXCEED: \$161,520.00	GRANT FUNDED / RENEWAL AMOUNT: N/A	
CONTRACT PERIOD: 05/01/2019 thru 04/30/2020		CONTRACT NUMBER: H19-25-037	
COMPETITIVE SELECTION METHODOLOGY:			
<input checked="" type="checkbox"/> NON-COMPETITIVE SELECTION METHODOLOGY: Sole Source			

PRIOR CONTRACT HISTORY:

There is no prior contract history with this vendor.

NEW PROPOSAL JUSTIFICATION:

This new request is to implement an electronic consent form. The benefit to e-consent is the automatic capture and archiving of the consent in the EMR. This request is a sole source as this vendor offers the only solution that interfaces with Cerner Millennium EMR.

TERMS OF REQUEST:

This is a request to execute contract number H19-25-037 in an amount not to exceed \$161,520.00, as needed, for a twelve (12) month period from 05/01/2019 thru 04/30/2020.

CONTRACT COMPLIANCE HAS FOUND THIS CONTRACT RESPONSIVE: Pending

CCH CFO:

Ekerete Akpan, Chief Financial Officer

CCHHS CEO:

John Jay Shannon, M.D., Chief Executive Officer

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APR 26 2019

BY BOARD OF
DIRECTORS OF THE COOK COUNTY
HEALTH AND HOSPITALS SYSTEM

Request #

17

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Toni Preckwinkle
President, Cook County Board of Commissioners

John Jay Shannon, MD
Chief Executive Officer, Cook County Health

April 8, 2019

To: Robert Reiter, Chair, CCH Finance Committee
M. Hill Hammock, Chair, CCH Board of Directors

CC: John Jay Shannon, MD, CCH Chief Executive Officer

From: James Kiamos, Chief Executive Officer, Managed Care 

Re: 12-Month Purchase of Reinsurance for CountyCare Health Plan (01/01/-12/31/2019)

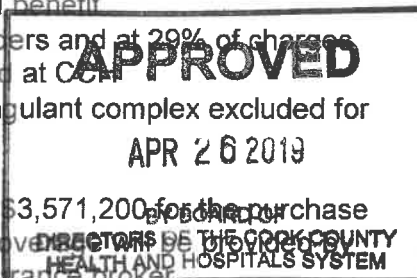
Since the inception of CountyCare, Cook County Health (CCH) has purchased reinsurance to offset the risk of its high-cost members. Initially, reinsurance was focused only on members who received transplant services. Beginning in 2015, general stop-loss reinsurance was secured with a threshold of \$750,000 per member. Claims costs incurred in excess of that amount are reimbursed to CCH. Coverage is priced on a PMPM basis by population type (e.g. FHP, SPD, ACA Adults).

The CCH policy is issued under a County-wide insurance brokerage contract with Alliance Insurance Services, managed by the County's Office of Risk Management.

CCH recommends entering a stop-loss policy coverage for twelve months, through December 31, 2019. Based on the bids submitted, and pricing and risk analysis, the recommended policy would increase the per member reinsurance deductible from \$750,000 to \$1,000,000. Terms will include:

- \$1,000,000 per member deductible
- 90% reinsurance once deductible is met; \$2 million maximum benefit
- Costs are calculated at 100% of Medicaid for non-CCH providers and at 20% of charges (comparable to standard Medicaid rates) for services provided at CCH
- Blood factor products, blood derivatives and anti-inhibitor coagulant complex excluded for certain members

This memo requests the Board's approval of payment not to exceed \$3,571,200 for the purchase of re-insurance as described above for CountyCare members. The coverage is provided by Sequoia, as placed by Alliance Insurance Services, the County's insurance broker.



**Request #
18**

Cook County Health and Hospitals System
Finance Committee Meeting
Thursday, April 18, 2019

ATTACHMENT #2

CCH Finance Committee Meeting April 2019



Ekerete Akpan, Chief Financial Officer

April 18, 2019



Agenda

1. System-wide Financials & Stats
 - a. Financials
 - b. Observations
 - c. Financial / Revenue Cycle metrics
2. CCH Provider Service Financials
3. CountyCare Financials & Stats
4. Correctional Health services Financials & Stats
5. Department of Public Health Financials & Stats
6. Administration Financials
7. System-wide volumes/stats



Systems-wide Financials, Observations, and Revenue Cycle Metrics



COOK COUNTY
HEALTH

Income Statement for the Three Months ending Feb.- 2019 (in thousands)

CCH Systemwide	Year-To-Date		Variance	
	Actual	Budget	\$	%
<u>Operating Revenue</u>				
Net Patient Service Revenue	146,828	183,303	(36,475)	-20%
County Care Access Payments	105,515	-	105,515	n/a
CountyCare Capitation Revenue	444,507	455,437	(10,931)	-2%
Cook County Access Payments	12,447	12,447	-	0%
Other Revenue	1,121	3,250	(2,129)	-66%
Total Operating Rev	710,418	654,437	55,980	9%
<u>Operating Expenses</u>				
Salaries & Benefits	157,869	178,209	20,340	11%
Overtime	11,918	8,950	(2,967)	-33%
Contracted Labor	11,138	8,530	(2,608)	-31%
Pension*	27,482	81,841	54,359	66%
Supplies & Materials	10,648	15,538	4,890	31%
Pharmaceutical Supplies	20,074	20,207	132	1%
Purch. Svs., Rental, Oth.	55,128	77,206	22,078	29%
External Claims Expense	373,463	354,142	(19,320)	-5%
County Care Access Expense	105,515	-	(105,515)	n/a
Insurance Expense	6,670	7,359	689	9%
Depreciation	8,676	8,676	-	0%
Utilities	4,963	2,471	(2,492)	-101%
Total Operating Exp	793,545	763,130	(30,415)	-4%
Operating Margin	(83,127)	(108,693)	25,566	24%
Operating Margin %	-12%	-17%	5%	30%
Non Operating Revenue	49,522	64,854	(15,332)	-24%
Net Income/(Loss)	(33,605)	(43,839)	10,234	23%



Observations

- Primary Care visits are up by 4% versus FY18, and down 1% versus FY19 target
- Specialty Care visits are up by 3% versus FY18, and down 2% versus FY19 target
- Surgical Cases are down by 2% versus FY18, and down 8% versus FY19 target
- Inpatient Discharges are down 10% versus FY18
- LOS is down 3% versus FY18, and 3% versus FY19 target
- Emergency Department visits are down 3% versus FY18
- Deliveries are up by 6% versus FY18, and down 4% versus FY19 target
- Case Mix Index is up 25% versus FY18, and down 17% versus FY19 target
- System-wide uninsured numbers, captured by visit held 45% (Provident 36%, ACHN 45%, Stroger 48%)

Financial Metrics

Metric	As of end Feb-18/YTD	As of end Feb-19/YTD	Target
Days Cash On Hand**	15	21	60
Operating Margin***	-6.3%	-8.9%	-5.4%
Overtime as Percentage of Gross Salary	8.6%	8.1%	5.0%*
Average Age of Plant (Years)	23.3	23.2	10.7

*Days Cash on Hand - CCH target 60 days, Moody's 198 days . Overtime as percentage of Gross Salary – CCH target 5% , Moody's 2%

** Days Cash in Hand – Point in time i.e. as of end October for each year

***Excludes Pension Expense-Target based on compare group consisting of 'like' health systems : Alameda Health System, Nebraska Medical Center, Parkland Health & Hospital System, and UI Health



Revenue Cycle Metrics

Metric	Average FYTD 2019	Feb-19	Mar-19	Benchmark/Target
Average Days in Accounts Receivable <i>(lower is better)</i>	100	105	96	45.85 – 54.9*
Discharged Not Finally Billed Days <i>(lower is better)</i>	11	11	10.6	7.0
Claims Initial Denials Percentage <i>(lower is better)</i>	22%	20%	23%	20%

Definitions:

Average Days in Accounts Receivable: Total accounts receivable over average daily revenue

Discharged Not Finally Billed Days: Total charges of discharge not finally billed over average daily revenue

Claims Initial Denials Percentage: Percentage of claims denied initially compared to total claims submitted.

* Source HFMA Key Hospital Statistics and Ratio Margins – Posted 2014



Provider of Care Services Financial and Operational Statistics



Income Statement for the Three Months ending Feb.- 2019 (in thousands)

CCH Providers	Year-To-Date		Variance	
	Actual	Budget	\$	%
<u>Operating Revenue</u>				
Net Patient Service Revenue	146,828	183,303	(36,475)	-20%
Cook County Access Payments	12,447	12,447	-	0%
Other Revenue	862	2,795	(1,933)	n/a
Total Operating Rev	160,138	198,545	(38,407)	-19%
<u>Operating Expenses</u>				
Salaries & Benefits	131,866	140,707	8,842	6%
Overtime	10,196	7,629	(2,567)	-34%
Contracted Labor	10,255	5,721	(4,534)	-79%
Pension*	22,539	68,587	46,048	67%
Supplies & Materials	10,487	14,467	3,980	28%
Pharmaceutical Supplies	18,218	17,706	(512)	-3%
Purch. Svs., Rental, Oth.	33,807	48,214	14,407	30%
Insurance Expense	6,494	-	(6,494)	n/a
Depreciation	5,377	5,377	-	0%
Utilities	4,963	2,432	(2,531)	-104%
Total Operating Exp	254,200	310,840	56,640	18%
Operating Margin	(94,062)	(112,295)	18,233	16%
Operating Margin %	-59%	-57%	-2%	-4%
Non Operating Revenue	27,686	41,027	(13,342)	-33%
Net Income/(Loss)	(66,377)	(71,268)	4,892	7%

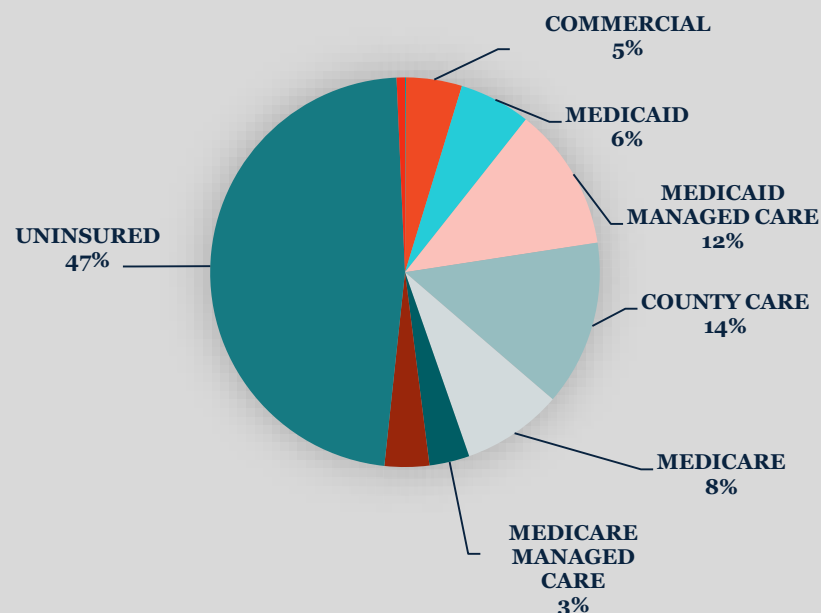


Revenue Statement for the Two Months ending Feb-2019 (in thousands)

CCHHS Providers	Year-To-Date <i>Actual</i>
Gross Revenue	399,604
<u>Adjustments</u>	
Contractual Adjustments	(109,518)
Charity Adjustments	(113,877)
Total Adjustment	(223,395)
Gross NPSR	176,209
Bad Debt Allowance	(101,640)
Adjusted NPSR	74,569
DSH	39,175
BIPA	33,084
Adjusted NPSR plus DSH and BIPA	146,828
Adjusted NPSR plus DSH and BIPA as a % of Gross Revenue	37%



Stroger Operations Overview for the Three Months ending February 2019



Comments:

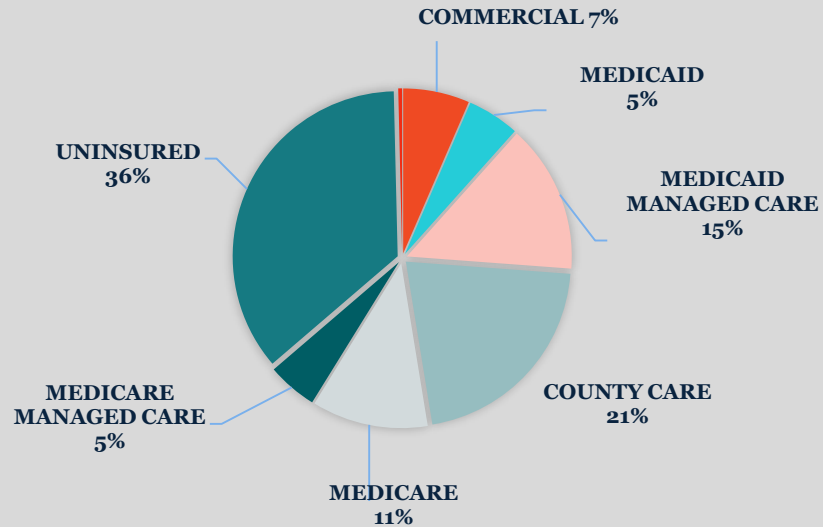
- Targeted efforts to improve surgical volumes is ongoing
- Leadership continues to work on throughput, observation days and discharges via Utilization Management and Operating Room Committee

Inpatient/Observation-FYTD			
Measure	FY2019	FYTD Target	FY2018
Inpatient Discharges	3,979	4,398	4,389
- Long Stay Admissions	856	891	886
- One Day Admissions	249	249	252
Inpatient Days	21,749	21,588	22,133
Observation Discharges	2,520	2,571	2,350
Observation Days (Observation Discharge)	5,109	4,698	4,768
Avg LOS (Inpatient Discharge)	5.9	---	6.0
Average Daily Census (Inpatient & Observation)	298.4	294.5	298.9
Surgical Cases	2,716	3,243	2,916
Procedures (CPTs)	---	---	---
Radiology Tests	10,559	---	10,422
Deliveries	245	273	229

Outpatient Clinic- FYTD			
Measure	FY2019	FYTD Target	FY2018
Total Registrations*	128,790	140,508	127,231
Total Provider Visits*	77,695	85,857	77,527
Specialty/Diagnostic/Procedure Provider Visits			
Austin (AH)	1186	1,419	1,389
Core Specialty	2,379	2,616	2,234
Hospital - Based	4,332	5,157	4,857
Specialty Care / Fantus / Professional Bldg	54,092	60,192	54,149
Total	61,989	69,384	62,629
Primary Care Provider Visits			
Core	3,097	3,456	3,092
Core Peds	97	147	107
GMC	11,509	11,745	10,733
Peds	1,003	1,125	966
Total	15,706	10,982	14,898

Emergency- FYTD			
Measure	FY2019	FYTD Target	FY2018
Emergency Visits (includes LWBS & Trauma)	29,209	30,435	29,797
Adult Emergency Visits	24,135	25,206	24,317
Peds Emergency Visits	1,672	1,731	1,969
Trauma Visits	1,820	1,965	1,893
LWBS	1,582	1,218	1,618
Radiology Tests	23,238	---	25,144

Provident Operations Overview for the Three Month ending February 2019



Comments:

- Leadership reviewing Observation days & discharges, left without being seen
- Sustained growth in surgical cases and specialty services
- Expect more volume growth as we procure equipment and fully staff new clinical capacity

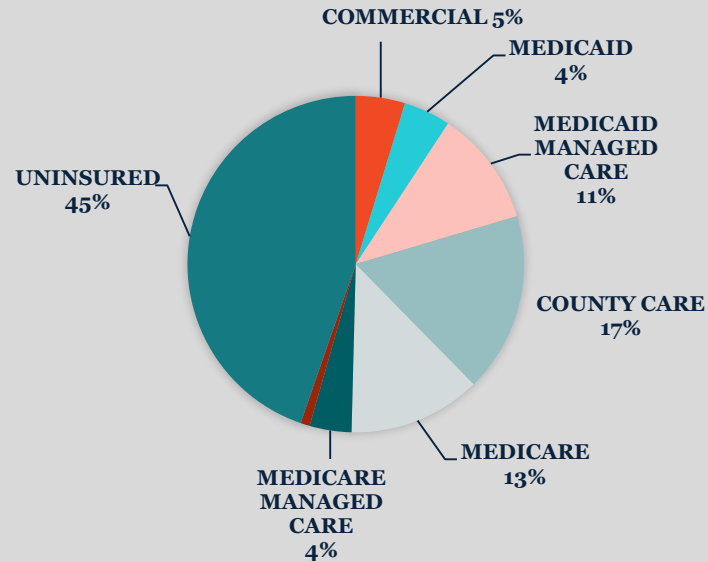
Inpatient/Observation-FYTD			
Measure	FY2019	Monthly Target	FY2018
Inpatient Discharges	137	147	178
- Long Stay Admissions	21	30	36
- One Day Admissions	14	9	11
Inpatient Days	627	750	799
Observation Discharges	170	156	150
Observation Days (Observation Discharge)	321	309	293
Avg LOS (Inpatient Discharge)	5.9	---	6.0
Average Daily Census (Inpatient & Observation)	10.5	12	12.1
Surgical Cases	678	909	562
Procedures (CPTs)	---	---	---
Radiology Tests	76	---	78

Emergency- FYTD			
Measure	FY2019	Monthly Target	FY2018
Emergency Visits (including LWBS)	7,168	8,208	7,403
Adult Emergency Visits	6,304	7,219	6,510
Peds Emergency Visits	340	442	452
LWBS	524	306	441
Radiology Tests	3,821	---	4,160

Outpatient Clinic- FYTD			
Measure	FY2019	Monthly Target	FY2018
Total Registrations	20,842	22,344	18,558
Amb of Prov - Specialty/Diagnostic/Procedure Provider Visits	379	608	673
Sengstacke - Specialty/Diagnostic/Procedure Provider Visits	7,888	8,354	6,671
Sengstacke Primary	4,354	4,185	3,757
Sengstacke Primary Peds	236	189	31
Radiology Tests	2344	---	2240



ACHN Operations Overview for the Three Months ending February 2019



Comments :

- Positive growth trends in Primary care and Specialty care provider visits (2% growth) vs FY 2018 actuals
- Leadership continues to focus on initiatives including patient access and increasing specialty care availability at clinics

CCHC Primary- FYTD			
Measure	FY2019	FYTD Target	FY2018
Arlington Heights (AR)/Vista (VH)	2,593	2,943	2,572
Austin (AH)	2,783	3,396	3,156
Child Advocacy	121	141	155
Cicero (CH)	2,550	2,871	2,626
Cottage Grove (CG)	2,254	2,502	2,143
Englewood (EH)	3,227	3,159	2,745
Logan Square (LS)	3,212	3,609	3,328
Morton East (ME)	216	234	230
Near South (NS)	3,317	3,789	3,287
OFHC (OF)	3,334	3,903	3,467
Prieto (PH)	4,164	4,389	4,049
Robbins (RH)	2,512	2,607	2,265
Woodlawn (WH)	2,558	2,664	2,177
Total Primary Care Provider Visits	32,841	36,207	32,200

CCHC Specialty- FYTD			
Measure	FY2019	FYTD Target	FY2018
Austin (AH)	92	117	109
Cicero (CH)	208	258	251
Logan Square (LS)	211	243	208
OFHC (OF)	6,698	7,632	6,683
Oral Health (OH)	1,100	1,323	1,252
Siegle Health Center	109	---	-
Total Specialty Care Provider Visits	8,418	9,573	8,503

CCHC Total- FYTD			
Measure	FY2019	FYTD Target	FY2018
Total Registrations*	59,080	65,769	57,530
Total Provider Visits*	40,200	44,505	39,489

*excludes Stroger Specialty Care, CORE, Stroger-Hospital Based Clinics, Sengstacke GMC & Psych, Austin Behavioral Health, and Oral Health assuming all registrations are provider visits



CountyCare Health Plan Financial and Operational Statistics

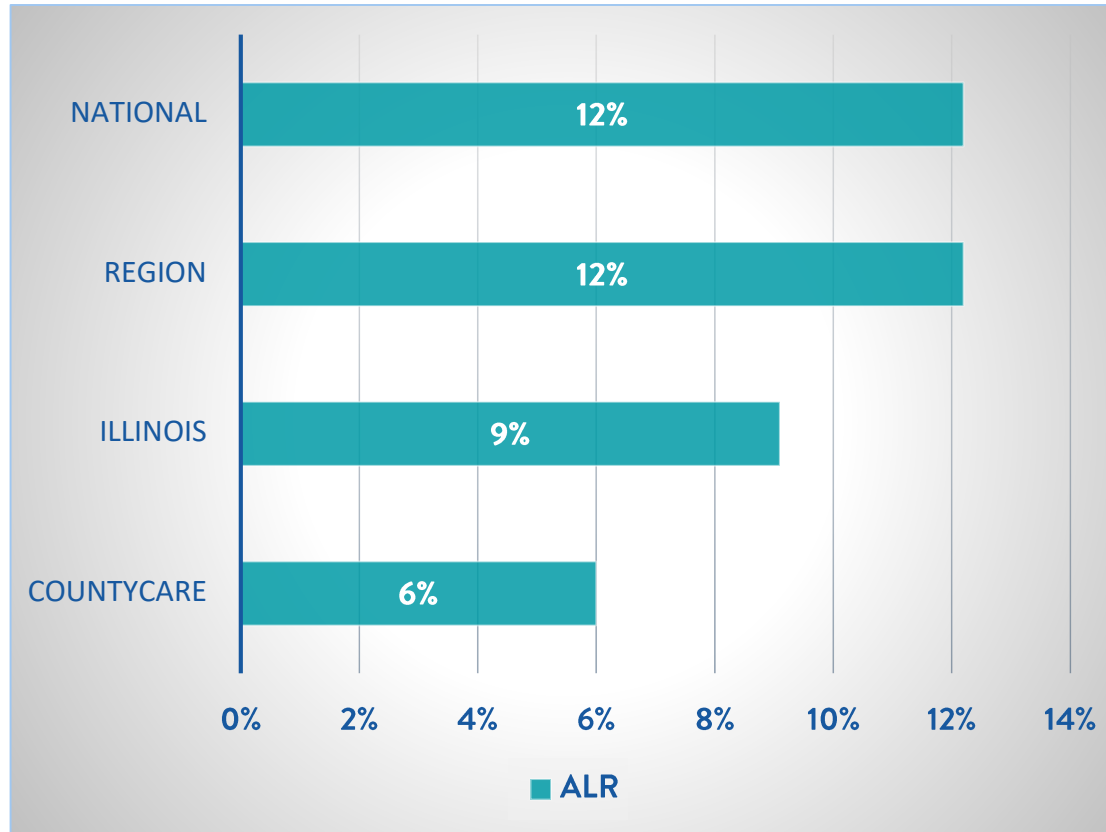


Income Statement for the Three Months ending Feb.- 2019 (in thousands)

	Actual	Year to Date Budget	Variance
Member Months	998	973	25
Total Revenue	556,437	427,266	129,170
Expense			
Total Admin Expenses	21,356	19,030	(2,326)
CCH Clinical Expenses			
Claims	39,449	55,302	15,853
Pharmacy Claims	3,989	8,380	4,391
Care Management	2,934	-	(2,934)
Total CCHHS Clinical Expenses	46,372	63,682	17,310
External Clinical Expenses			
Claims	266,899	221,951	(44,948)
Hospital Supplemental Access Pmt	105,515	-	(105,515)
Pharmacy Claims	77,341	75,042	(2,299)
Care Management	14,111	19,212	5,101
Dental Claims	8,373	9,926	1,553
Transportation Claims	4,169	4,505	336
Optical Claims	1,741	1,143	(598)
Member Incentives	828	854	27
Total External Clinical Expenses	478,978	332,633	(146,345)
Total Clinical Expenses	525,350	396,316	(129,034)
Total Expenses	546,706	415,345	(131,361)
Net Income Before Rate Adjustment	9,731	11,921	(2,190)
Medical Loss Ratio (MLR)	94%	93%	-2%
Net Income Before Prior Period Adj/IGT	9,731	11,921	(2,190)
IGT	6,415	9,013	(2,599)
Amortization	2,319	2,319	-
Net Income After IGT And Amortization	997	588	409
Total CCHHS Impact	56,102	75,603	(19,501)



CountyCare Operations Stats for the Three Months ending February 2019



Comments:

- CountyCare Medical Loss Ratio is better than National and Regional, sustained at 94% YTD.
- With 320,994 members in February 2019 , CountyCare is the still largest Medicaid Managed Care plan in Cook County
- Leadership focused on several initiatives to achieve cost efficiency and protect market share

Milliman Research Report-Medicaid Risk-Based Managed Care: Analysis of Financial results for 2016 . Region consists of Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin
MLR – Medical Loss Ratio , %tage of premium spent on health care quality . ALR Administrative loss Ratio - %tage spent on overhead expenses, such as marketing, profits, salaries, administrative costs etc.



Correctional Health Services Financial and Operational Statistics



COOK COUNTY
HEALTH

Income Statement for the Three Months ending Feb.- 2019 (in thousands)

Correctional Health Services	Year-To-Date		Variance	
	Actual	Budget	\$	%
Total Operating Rev	0	-	0	0%
<u>Operating Expenses</u>				
Salaries & Benefits	14,243	17,033	2,790	16%
Overtime	1,573	1,209	(365)	-30%
Contracted Labor	23	92	69	75%
Pension*	2,410	5,999	3,589	60%
Supplies & Materials	147	184	37	20%
Pharmaceutical Supplies	1,857	2,500	643	26%
Purch. Svs., Rental, Oth.	627	2,750	2,123	77%
Insurance Expense	93	-	(93)	n/a
Depreciation	26	26	-	0%
Total Operating Exp	20,999	29,792	8,792	30%
Operating Margin	(20,999)	(29,792)	8,793	30%
Operating Margin %	na	na	na	na
Non Operating Revenue	19,303	20,031	(728)	-4%
Net Income/(Loss)	(1,696)	(9,760)	8,065	83%

Unaudited Financial Statement



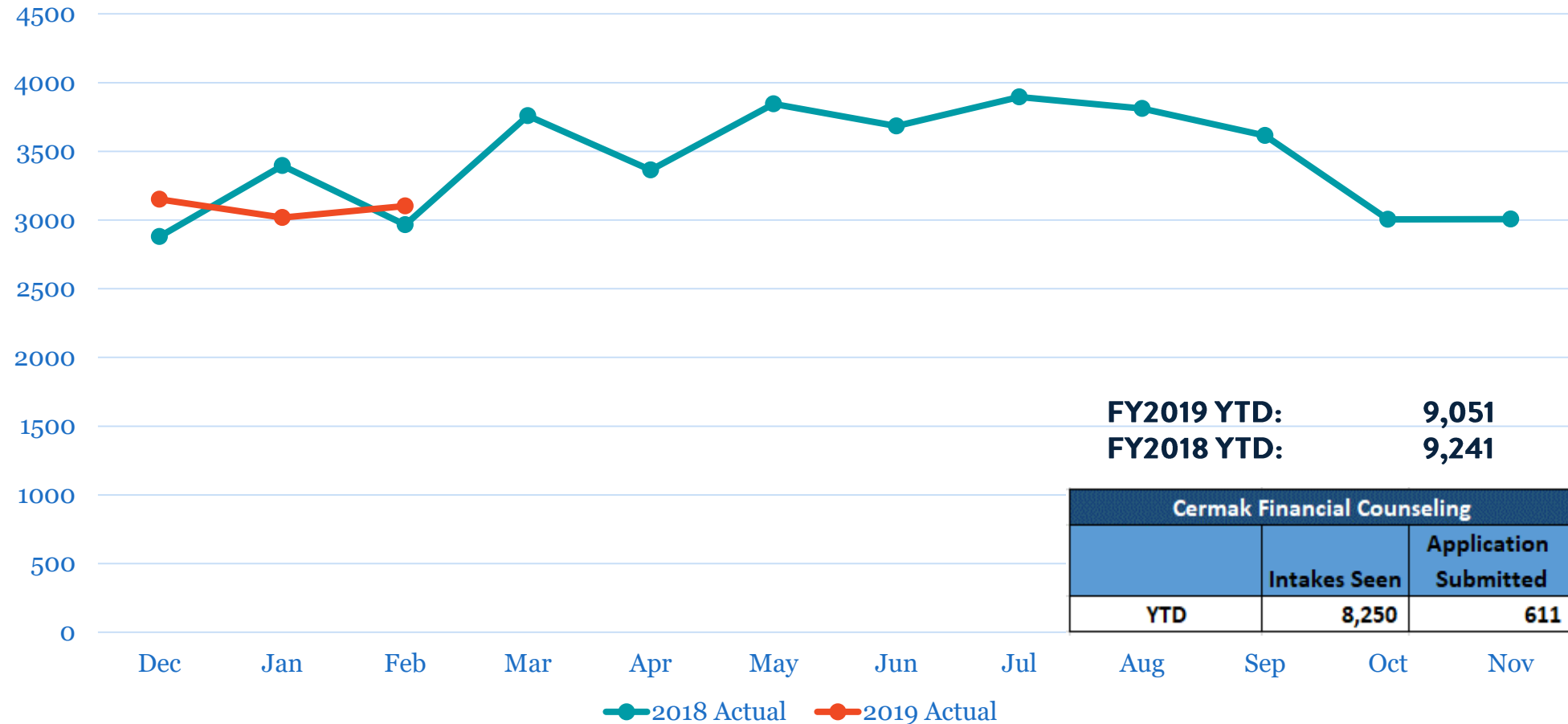
COOK COUNTY
HEALTH

*Year to Date (3 months) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense

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Correctional Health Operation Overview for the Three Months ending February 2019

Total Intakes



Comments:

- Over 91% of intakes are screened by financial counselling to ensure continuity of coverage

Cook County Dept. of Public Health Financial and Operational Statistics



Income Statement for the Three Months ending Feb.- 2019(in thousands)

COOK COUNTY PUBLIC HEALTH	Year-To-Date		Variance	
	Actual	Budget	\$	%
Total Operating Rev	258	455	(197)	-43%
<u>Operating Expenses</u>				
Salaries & Benefits	2,165	2,585	420	16%
Overtime	3	2	(1)	-49%
Contracted Labor	0	34	34	99%
Pension*	359	834	475	57%
Supplies & Materials	5	29	24	81%
Purch. Svs., Rental, Oth.	99	580	480	83%
Insurance Expense	16	-	(16)	n/a
Depreciation	1	1	-	0%
Utilities	-	25	25	100%
Total Operating Exp	2,648	4,089	1,441	35%
Operating Margin	(2,390)	(3,634)	1,244	34%
Operating Margin %	na	na	na	na
Non Operating Revenue	359	436	(77)	-18%
Net Income/(Loss)	(2,030)	(3,197)	1,167	36%

Unaudited Financial Statement



COOK COUNTY
HEALTH

*Year to Date (3 months) Pension Liability per GASB
Pension includes Other Post Employment Benefits (OPEB) Expense

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CCDPH Operation Overview for the Three Months ending February 2019

	Program Title	Metric	YTD Thru Feb 19	FY19 Target
Public Health	Administration	Percent of high-risk infant APORS (Adverse Pregnancy Outcome Reporting System) referrals received that are contacted for follow-up by the Public Health Nurse within 14 calendar days of referral	84%	85%
		Cost per county residents served	\$5.71	\$5.71
	Environmental Health	Cost per Inspection Efficiency	\$208.56	\$208.56
		Time from receipt of Chlamydia or gonorrhea report to field (days)	5	5
	Communicable Diseases	Percent of food establishments with isolated illness complaints within a contracted community or unincorporated Suburban Cook County that are inspected within 2 business days of receipt of complaint	100%	100%
	Program Title	Metric	YTD Thru Feb 19	FY19 Target
Lead Poisoning Prevention	Lead Poisoning Prevention	Percentage of cases with elevated blood levels visited within the timeline provided in protocols	90%	90%
		Percentage of cases with elevated blood lead levels who receive joint nursing visit and environmental risk assessment visit	95%	95%
	Program Title	Metric	YTD Thru Feb 19	FY19 Target
TB Program	TB Program	Number of completed Direct Observation Treatments (DOT)	95%	91%



CCH Administration Financial Statements



Income Statement for the Three Months ending Feb.- 2019 (in thousands)

<u>Administration</u>	Year-To-Date		Variance	
	<i>Actual</i>	<i>Budget</i>	\$	%
<u>Operating Expenses</u>				
Salaries & Benefits	8,739	9,527	788	8%
Overtime	73	43	(30)	-71%
Contracted Labor	860	2,683	1,823	68%
Pension*	1,462	4,643	3,181	69%
Supplies & Materials	9	156	147	94%
Purch. Svs., Rental, Oth.	168	794	626	79%
Insurance Expense	68	-	(68)	n/a
Depreciation	953	953	-	0%
Total Operating Exp	12,333	18,798	6,465	34%
Operating Margin	(12,333)	(18,798)	6,465	34%
Non Operating Revenue	1,462	2,429	967	40%
Net Income/(Loss)	(10,871)	(16,369)	5,498	34%

Unaudited Financial Statement



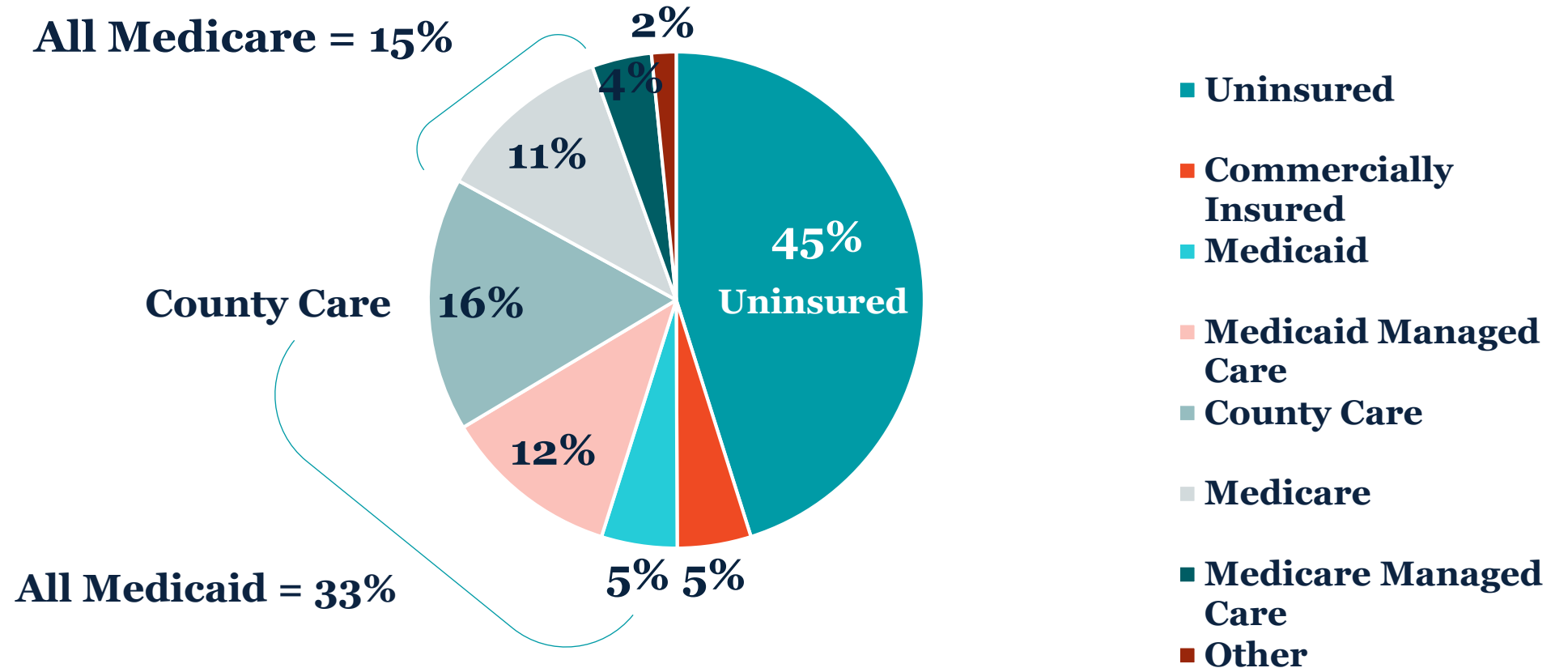
Appendix

System-wide Volumes / Stats

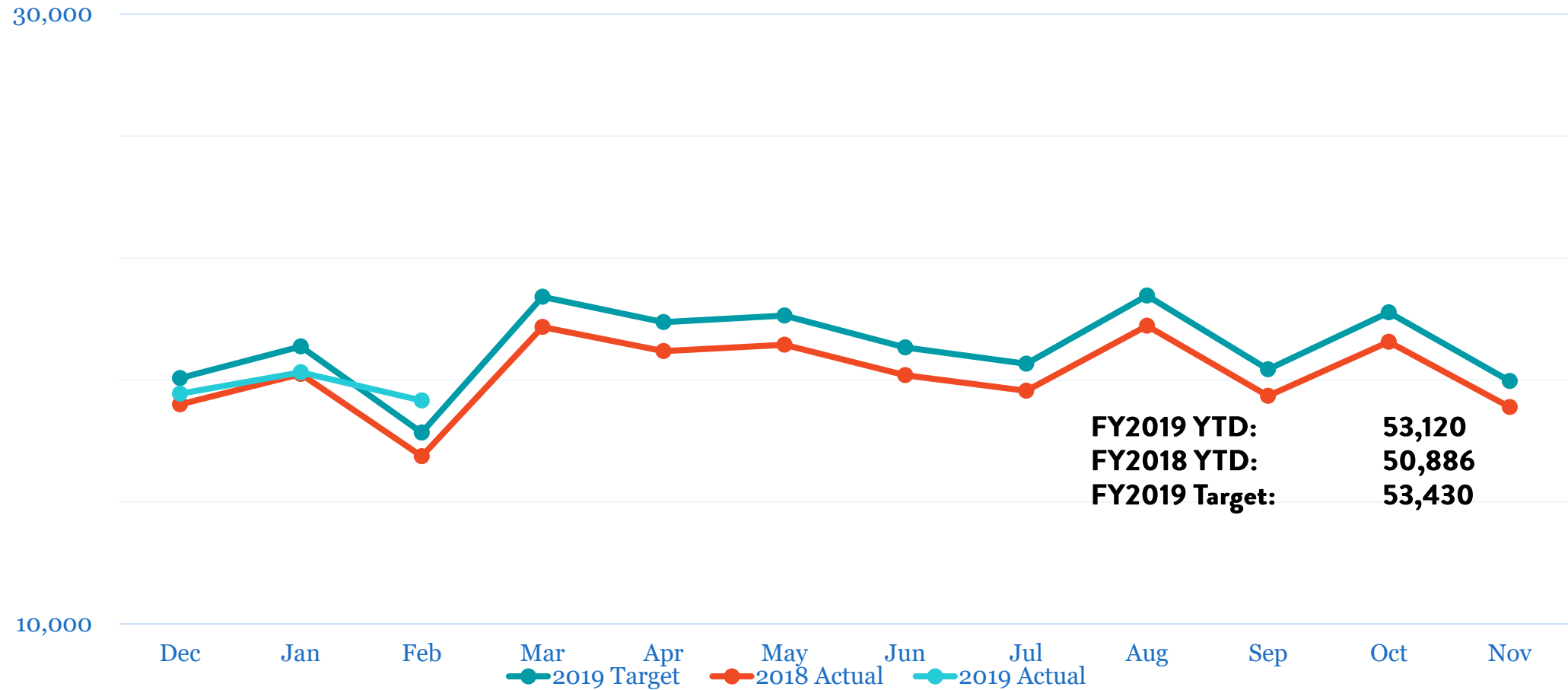


COOK COUNTY
HEALTH

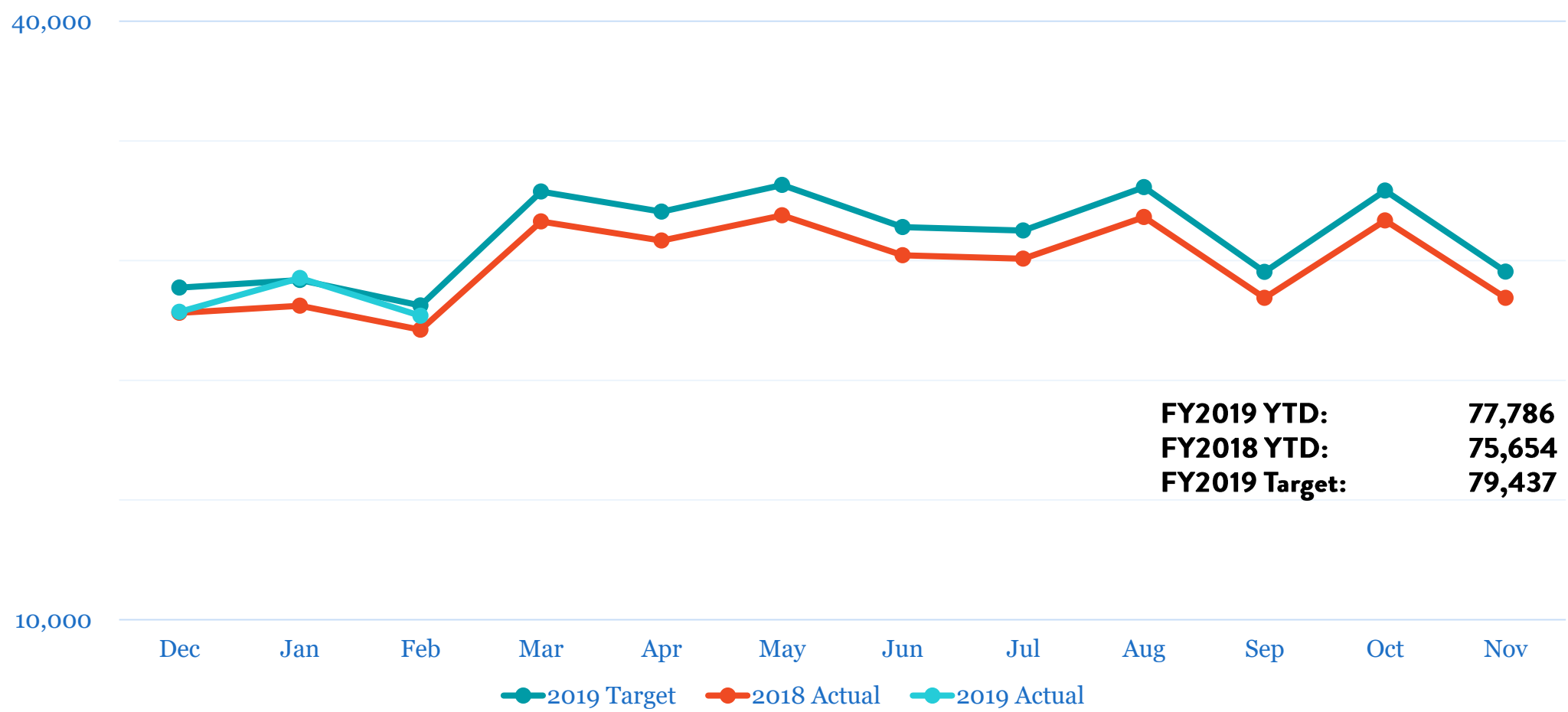
System Payor Mix By Visit



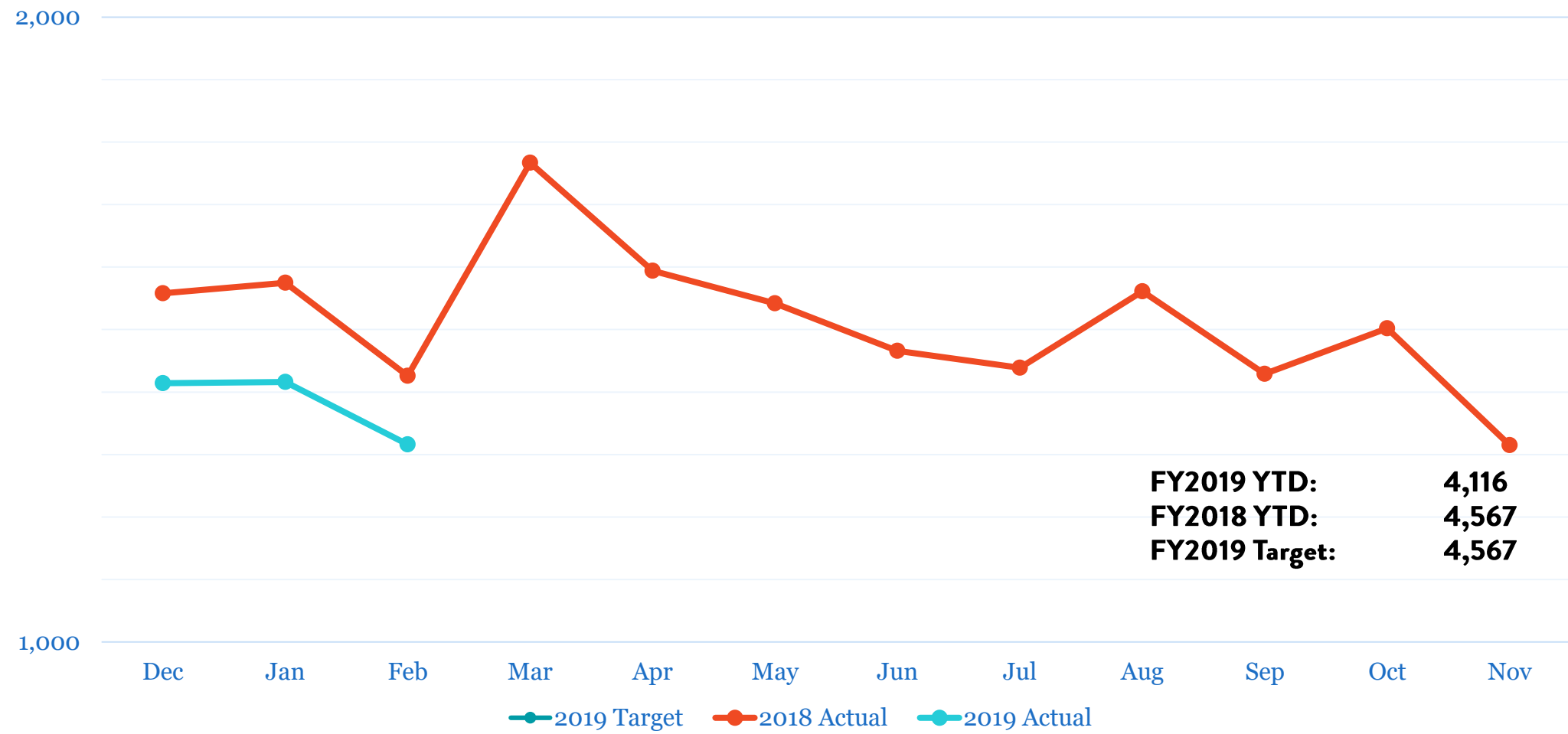
Primary Care Provider Visits



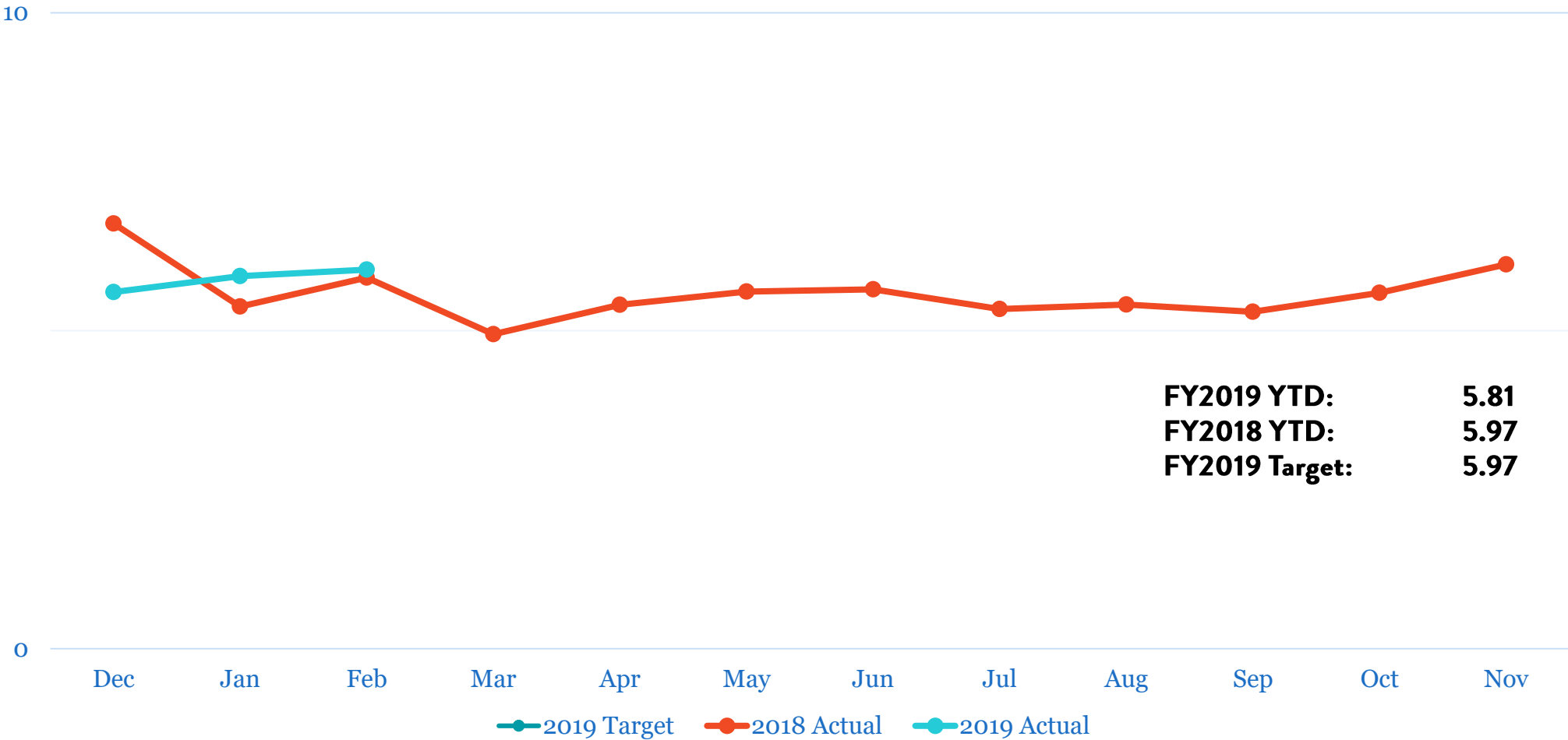
Specialty Care Provider Visits



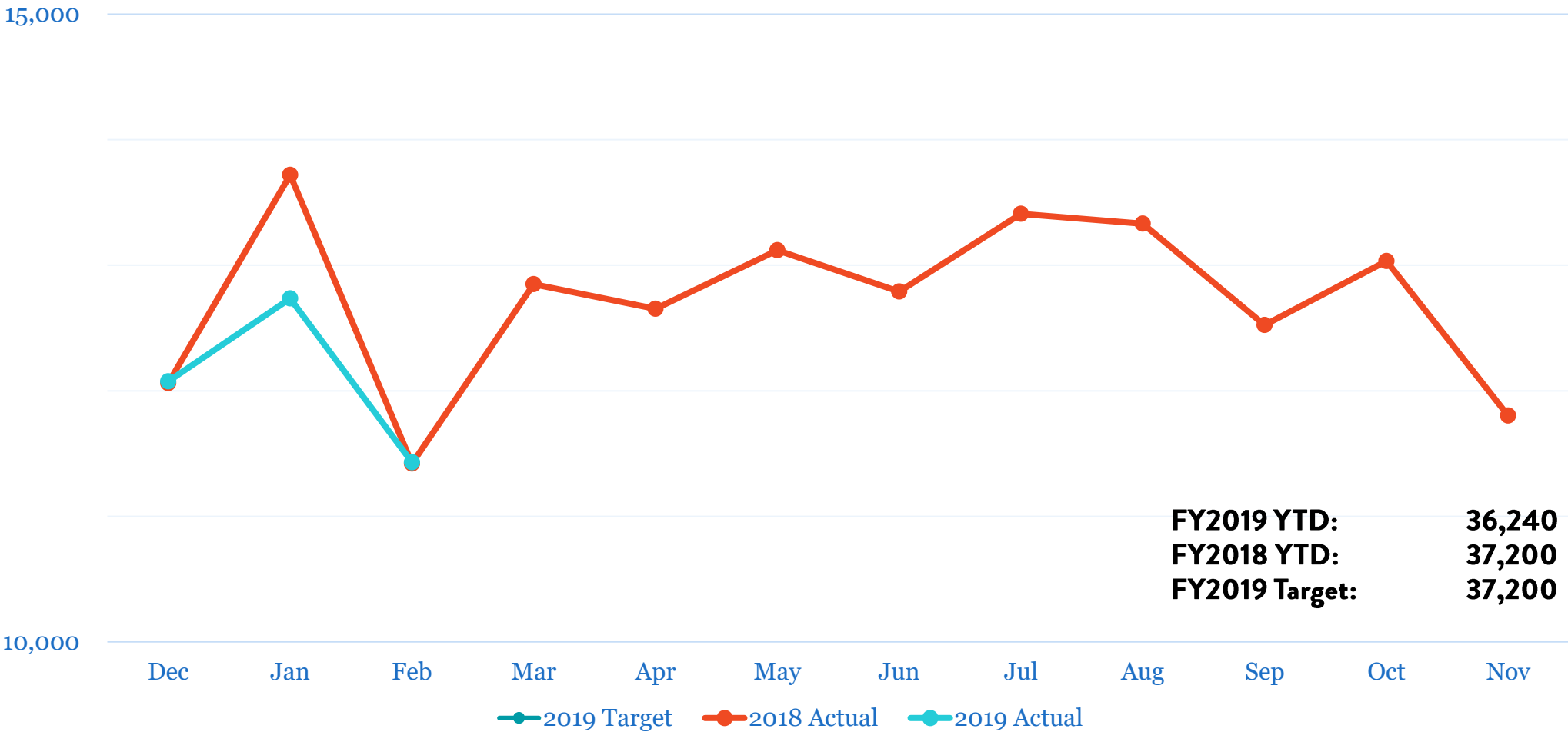
Total Inpatient Discharges



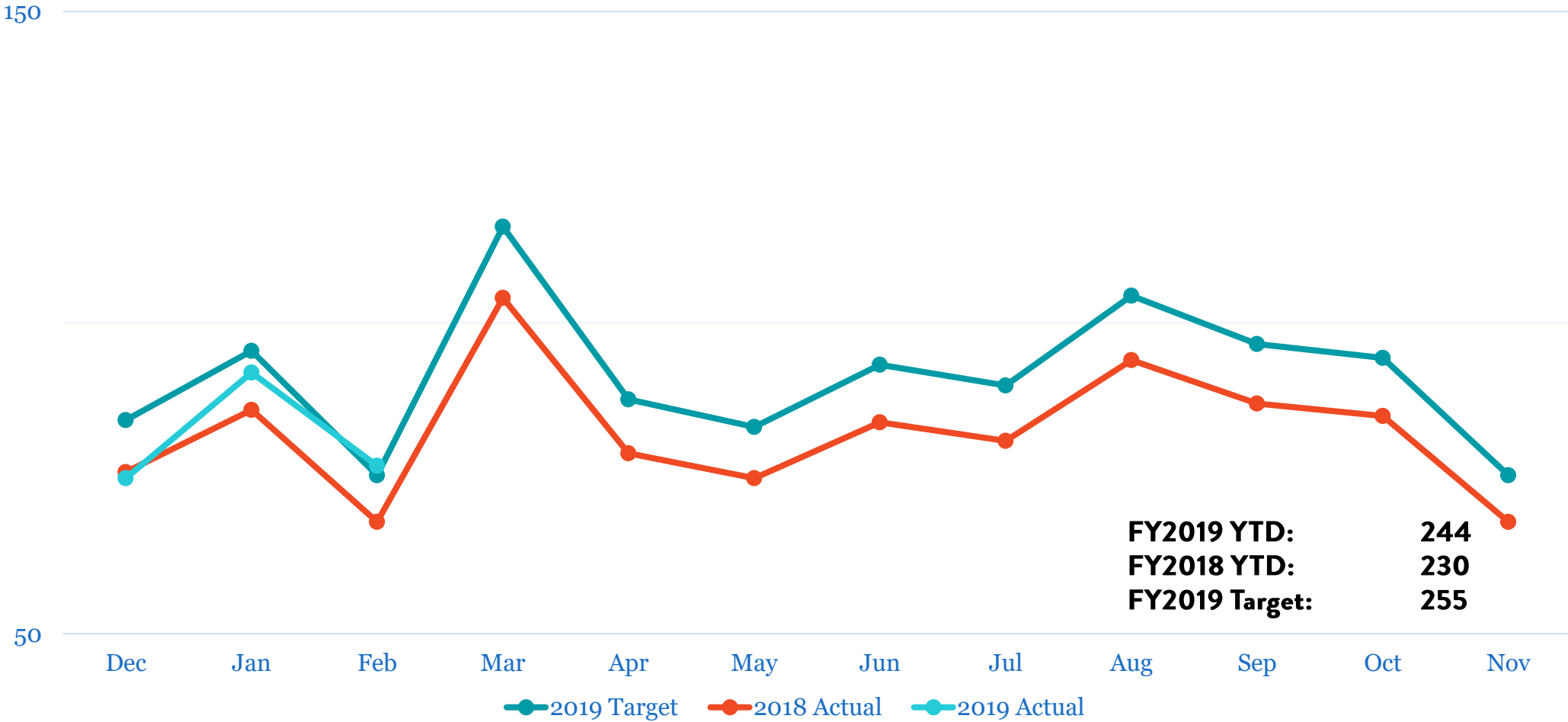
Average Length of Stay



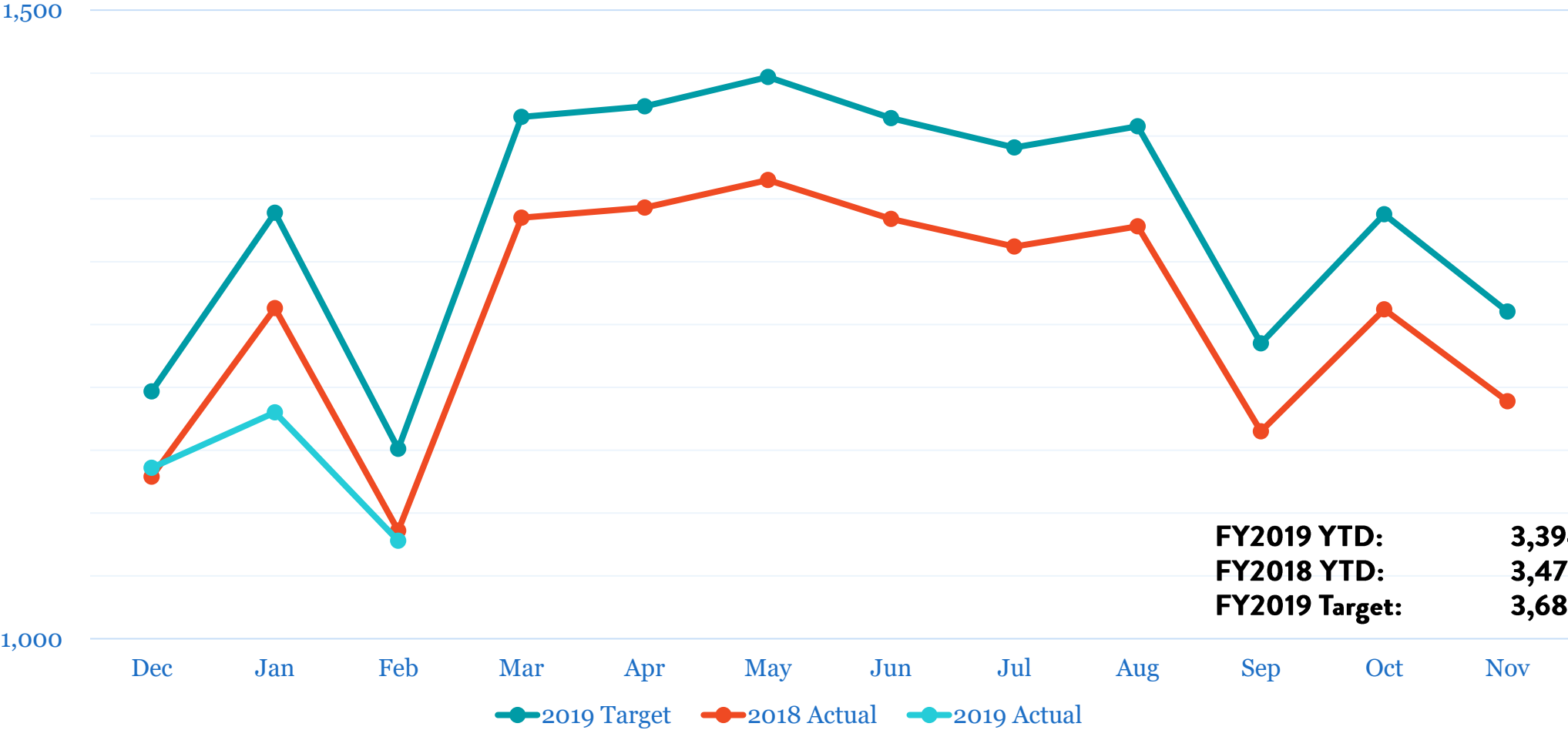
Total Emergency Room Visits



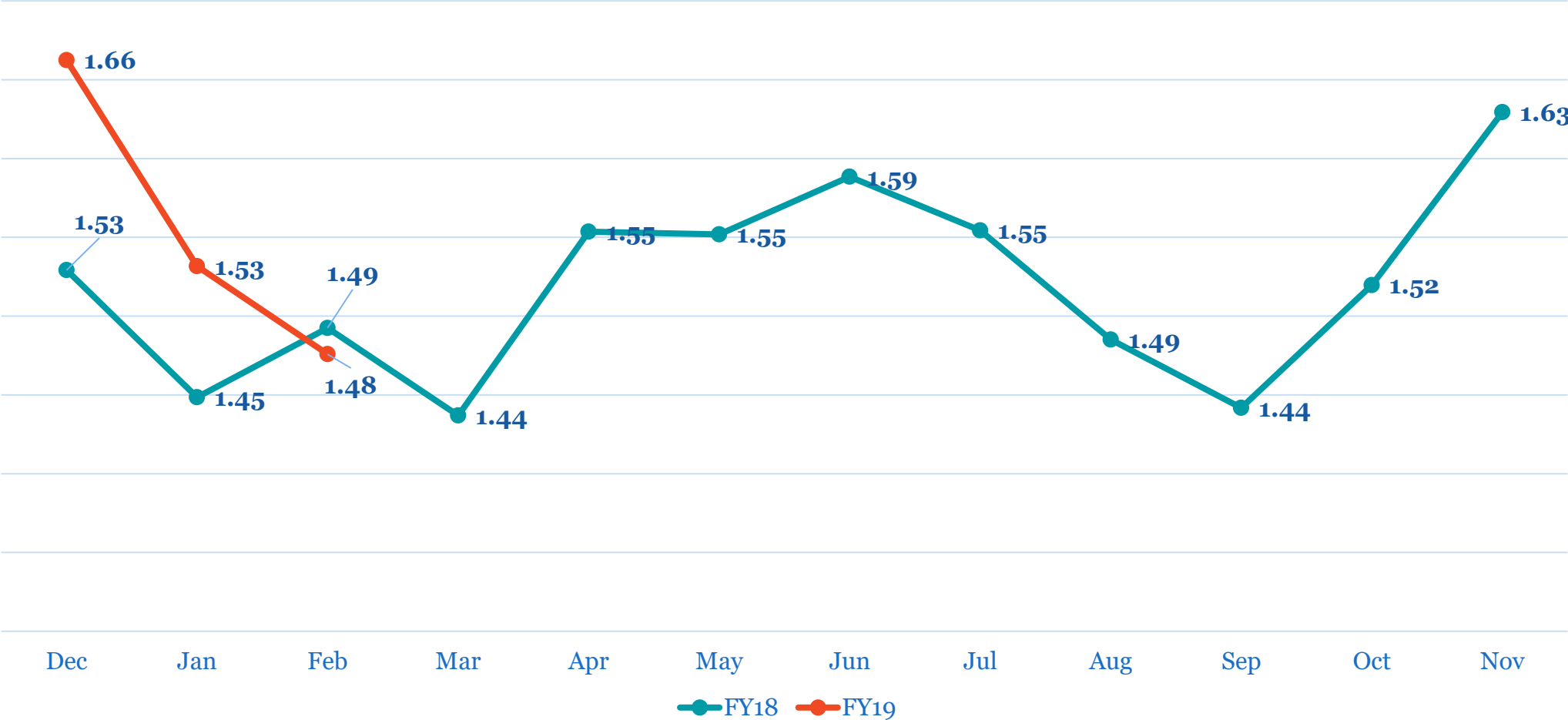
Total Deliveries



Total Surgical Cases



Case Mix Index



Questions?



COOK COUNTY
HEALTH

Cook County Health and Hospitals System
Finance Committee Meeting
Thursday, April 18, 2019

ATTACHMENT #3

Strategic Planning FY2020- 2022

Capital Equipment – Investing for the Future

Ekerete Akpan

Chief Financial Officer

April 18, 2019



COOK COUNTY
HEALTH

Agenda

1. Impact 2020 Updates
 - a. Definitions
 - b. CCH trends Net Capital Assets, additions and depreciation expenses
 - c. Cook County Real Estate Asset Strategic Alignment Plan (REASRP)
 - d. Capital Assets purchases FY2016 – 2018
 - e. Sources of financing - Capital Assets purchases FY2016 – 2018
 - f. FY2019 Capital planning priorities
 - g. FY 2019 Planned capital expenses
2. FY2020-2022 Environmental scan
 - a. Top issues confronting hospitals
 - b. Top financial challenges facing hospitals
 - c. 2019 Credit agencies outlook and common themes
 - d. FY2020 capital budget planning process
 - e. FY2020-2022 potential funding sources

Impact 2020 Update

Capital Assets and Investments



COOK COUNTY
HEALTH

Definitions

What is a Capital Asset on CCH Books?

- **Capital assets** include land improvements, buildings, building improvements, Equipment , furniture and intangible assets , recorded at cost at the time of receipt and, in case of construction in progress, are transferred from the County at time of completion.
- Capital assets are defined by CCH as assets with initial, individual costs of \$5,000 or more and with estimated time benefit beyond one year.
- **Depreciation** is the allocation of the cost of a capital asset over the estimated useful life of each class of assets. Estimated useful life is as follows;
 - Land Improvements 5-25 years
 - Buildings 20-40-years
 - Building Improvements 5-40 years
 - Equipment & Furniture 3-20 years
- Except for pre-2008 assets at Stroger Hospital, CCH depreciation is calculated using the straight line method



Definitions

What is a Capital Budgeting?

- As part of annual budgeting process, the County reviews and assess its capital programming needs regarding
 - Capital Improvement to facilities
 - Transportation and Highways
 - Capital Equipment purchases
- Capital programming entails the review of short, medium and long-term capital investments required to promote the efficient and effective provision of services to Cook County residents and a determination of the County's willingness and ability to issue new-taxpayer funded debt for capital expenditures and/or fund capital projects through operating budgets.
- Capital budgeting aims to achieve a prudent balancing of legacy debt obligations, operating budget priorities, and debt service costs.
- In FY2019, the County proposed;
 - \$274.9M for Capital Improvement Program (CIP) - CCH debt funded portion \$104.3M
 - \$84.9M for Transportation & Highways
 - \$99.2M for Capital Equipment Program (CEP) - CCH funded portion \$4.8M, CCDPH Special funds \$200K

CCH Audited Financial Statements Extract

Net Capital Assets, Additions and Depreciation Expenses (\$'s in millions)

	2013	2014	2015	2016	2017
Net Capital Assets	\$426.4	\$400.4	\$395	\$397.4	\$401.5
Additions to Capital Assets	\$21.9	\$6.5	\$22.4	\$29.1	\$2.3
Depreciation Expense	\$34.3	\$32.5	\$27.8	\$27.1	\$25.4
Average Age of Plant (Years)	14.1	15.9	19.6	21.1	23.4

- **Capital assets** include land improvements, buildings, building improvements, Equipment , furniture and intangible assets , recorded at cost at the time of receipt and, in case of construction in progress, are transferred from the County at time of completion.
- Capital assets are defined by CCH as assets with initial, individual costs of \$5,000 or more and with estimated time benefit beyond one year.

Cook County Real Estate Asset Strategic Realignment Plan

Estimated 20-year total Capital and Operating expenditure needed

- A 2015 County wide focused study of operating expenses, to develop long-range capital plan to better allocate the County's finite resources and develop recommendations to reduce real estate portfolio and costs.
- Study estimated the 20-year cost of operating and maintaining some CCH facilities as follows;

Stroger Hospital Campus	\$240M
Provident Hospital and Related Facilities	\$194M
Oak Forest Health Center	\$353M
Total Cost	\$787M

- Annualized Cost **\$39.5M**

FY 2016 through 2018

Capital Assets Purchases

Asset Class	2016	2017	2018
Fixed Plant	15,390	1,027,088	7,259,385
Medical Equipment	11,367,814	294,802	262,196
Telecom Equipment	923,182	35,311	
IT Equipment	2,121,832	13,703	
Furniture & Equipment	320,199		
Vehicle Purchases	5,688		
Building / Building Improvements	14,387,258	928,994	112,752,565
Total	29,141,362	2,299,899	120,274,146

Note: There may be small rounding differences in totals



FY 2016 through 2018

Sources of Financing - Capital Assets Purchases

Sources	2016	2017	2018
Cook County Bonds	14,387,258	928,994	112,752,566
CCH Operational Funds	14,754,104	1,370,905	7,521,581
Donations / Foundation			59,085
Total	29,141,362	2,299,899	120,333,231

FY 2019 Capital Planning Priorities

Guiding Principles

- Align to Impact 2020 strategic plan initiatives
- Priority to investments that drive growth/improve quality and meet safety/regulatory priorities
- Allocation decision informed by an assessment of equipment end-of-life and obsolescence determination
- Meet or exceed annual depreciation expenses (\$30M)
- Subject to capital funding availability either through the County bonds process or CCH operational funding sources
- Exploring extramural funding opportunities like donations

FY 2019 Planned Capital Expenses

- Community Clinics – \$15M
 - Arlington Heights., North Riverside, Hanson Park, Blue Island
- Stroger (Including Professional Building) \$1.5M
 - Professional Building moves and equipment needs to support growth
- Provident - \$1.5M
 - Clinical enhancements to support growth including Intensive Care unit, Dialysis unit
- Cermak \$200K
 - Facility equipment
- Corporate Health Information Technology - \$12M
 - Hardware and Software systems upgrades



FY2020-2022

The Future

Environmental Scan of Market, Best Practices and Trends



COOK COUNTY
HEALTH

Environmental Scan of Market, Best Practices and Trends

2018 Top Issues Confronting Hospitals – ACHE CEO Research Findings

Issue	2018	2017	2016
Financial challenges	2.8	2.0	2.7
Governmental mandates	5.1	4.2	4.2
Patient safety and quality	5.1	4.9	4.6
Personnel shortages	5.2	4.5	4.8
Behavioral health/addiction issues	5.3	—	—
Patient satisfaction	6.1	5.5	5.5
Access to care	6.2	5.9	5.8
Physician-hospital relations	6.6	5.9	5.9
Technology	7.7	7.0	7.2
Population health management	8.1	7.3	6.6
Reorganization (e.g., mergers, acquisitions, restructuring, partnerships)	8.3	7.5	7.8

The average rank given to each issue was used to place the issue in order of how pressing it is to hospital CEOs, with the lowest numbers indicating the highest concerns.

The survey was confined to CEOs of community hospitals (nonfederal, short-term, nonspecialty hospitals).



Environmental Scan of Market, Best Practices and Trends

2018 Financial Challenges – ACHE CEO Research Findings

(n=355) ¹	
Increasing cost for staff, supplies etc.	70%
Medicaid reimbursements	68%
Reducing operating costs	59%
Competition from other providers	56%
Managed care and other commercial insurance payments	50%
Medicare reimbursements	50%
Government funding cuts(other than Medicare /Medicaid)	49%
Transition from volume to value	48%
Revenue cycle management	48%
Inadequate funding for capital improvements	43%
Emergency department overuse	37%
Moving away from fee-for-service	30%
Pricing and price transparency	29%
Other	N=17



Environmental Scan of Market, Best Practices and Trends

2019 Credit Ratings Agencies Outlook and Comments

- Standards & Poor's 01/10/2019: “U.S. Not-For-Profit Health Care 2019 sector outlook: Stable overall, yet key risks remain.”
- Fitch Ratings 03/26/2019: “Fortunes may soon turn for the better for U.S. not-for-profit hospitals ... U.S. not-for-profit hospitals appear to have weathered the worst of their operational challenges with more performance stability not far off.”
- Moody's 12/03/2018: “US not-for-profit's, public healthcare outlook to remain negative on flat to slightly down operating cash flow.”
- Cook County General Obligation Bond Ratings
 - Moody's Investors Service: A2 (Stable Outlook)
 - Fitch Ratings: A+ (Stable Outlook)
 - Standard & Poor's: AA- (Negative Outlook)



Environmental Scan of Market, Best Practices and Trends

2017 Credit Ratings Agencies Common Themes

- Emergence of non-traditional entrants looking to ‘disrupt’ healthcare delivery
- Payor mix shifts from commercial plans to government payors
- Continuing pressure on hospitals and health systems balance sheets with increasing bad debts, constrained profitability, operating margin and operating cash flow
 - Revenue growth will be constrained by low patient volume growth and higher bad debt as co-pays and deductibles rise
 - Expense growth challenges and need for management focus on cost efficiency measures
- 340B risks and other drug price increases
- Political risks including challenges and/or administrative changes to Affordable Care Act
- Continuing mergers, acquisitions and consolidation activities



FY 2020 Capital Budget Planning Process

CCH capital budget process steps/timeline must align with Cook County budget calendar

- Early April Cook County capital budget kickoff session
- End April Capital Improvement requests due to County (if debt funded)
- Early May CCH capital request out to departments / lines of business
- End May CCH capital requests received from departments
- Mid June CCH Capital Equipment Committee meets with department heads, clinical and administrative leadership to finalize FY2020 budget recommendations
 - Pivots from Impact 2020 and aligns with new strategic plan decisions
 - New growth or service needs
 - Funding and budget opportunity
- June - Oct CCH operational & capital budget submitted as part of Cook County Executive Budget Recommendation

FY 2020 - 2022 Potential Funding Sources*

- Internal CCH operational funds - \$30M
- Cook County Bonds/Capital Improvement Plans (FY19–\$104M, FY20 -\$141.5M, FY21-\$107M, FY22-\$32M)
 - Stroger and Central Campus
 - Community based health centers
 - Cook County Dept. of Public Health (CCDPH) Clinics
 - Provident hospital including dialysis center
 - Oak Forest (County feasibility study to identify options beyond CCH)
 - Other CCH
- Donations/ Foundation – Target of 200K in FY2019
- CCH Capital request to State of Illinois for community centers – \$50M

Thank you.



Cook County Health and Hospitals System
Finance Committee Meeting
Thursday, April 18, 2019

ATTACHMENT #4

Strategic Planning FY2020- 2022

Diagnostic & Specialty Services

Jarrold G. Johnson, MBA, NHA, FACHE

Chief Operating Officer, Stroger Hospital & Central Campus

April 18, 2019



**COOK COUNTY
HEALTH**

Overview of Departments



COOK COUNTY
HEALTH

Overview of Services

Diagnostic Services

- Radiology
- Laboratory & Pathology
- Cardiology
- Respiratory
- Gastroenterology

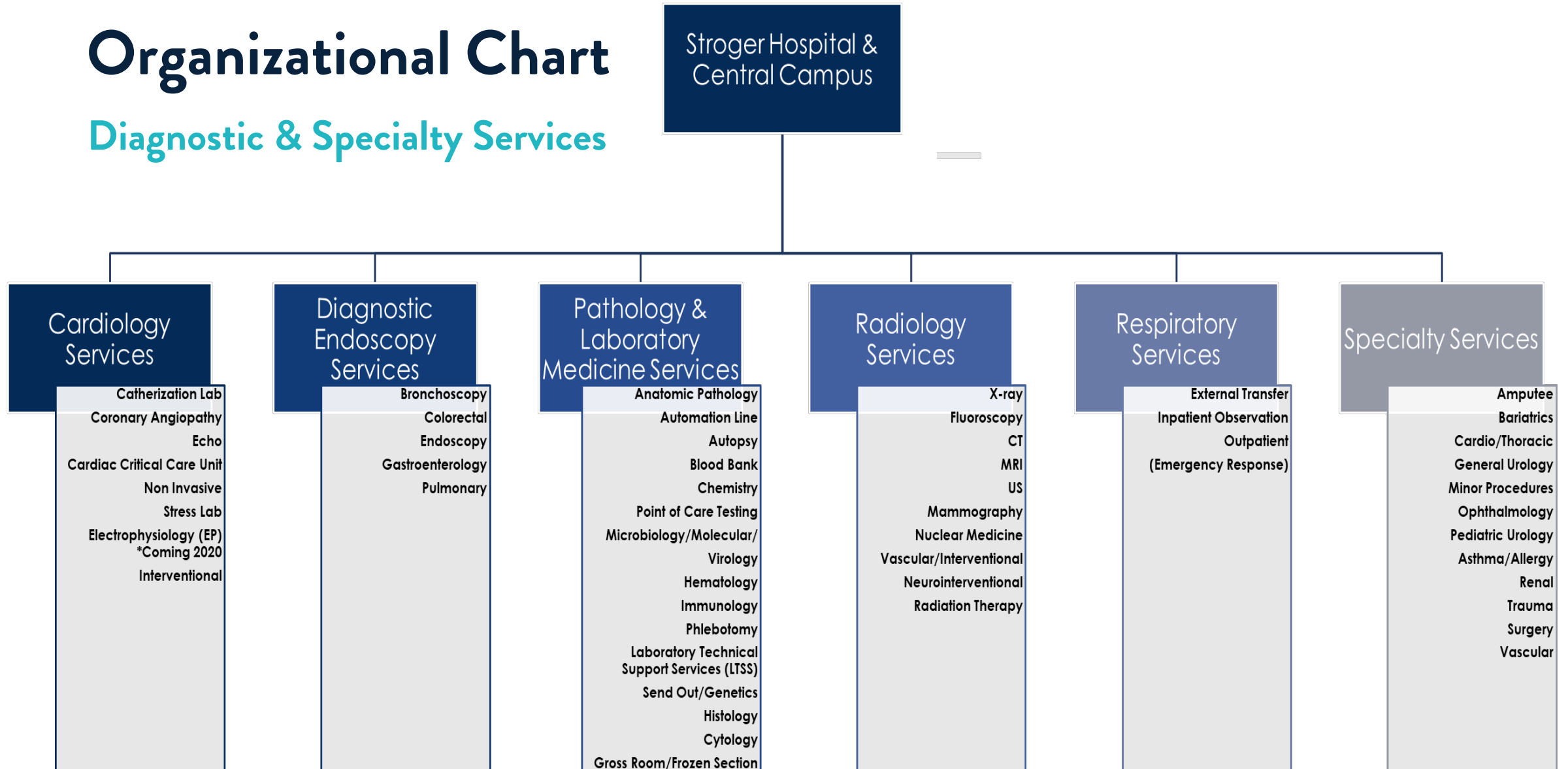
Specialty Services

- Urology
- Bariatrics
- Vascular
- Ophthalmology
- Pulmonary/Sleep
- Pain
- Orthopedics & Neurosciences
- Renal
- Oncology
- Colorectal
- Oral Maxillofacial Surgery



Organizational Chart

Diagnostic & Specialty Services



Impact 2020 Update



Status and Results

- Deliver High Quality Care
- Grow to Serve and Compete
- Foster Fiscal Stewardship
- Invest in Resources
- Leverage Valuable Assets
- Impact Social Determinants
- Advocate for Patients



Impact 2020

Progress and Updates

Focus Area	Name	Status
Deliver High Quality Care	Standardize and modernize outpatient clinic models with data and operational support to optimize operational practice.	Completed: In Progress: <ul style="list-style-type: none">• Develop productivity standards• Optimize patient workflow• Implement nurse care coordinators
Deliver High Quality Care	Integrate and expand additional services, in specialty care	Completed: <ul style="list-style-type: none">• Bariatric Services In Progress: <ul style="list-style-type: none">• Urology• Vascular• Service line development
Deliver High Quality Care	Make investments in outpatient facilities	Completed: <ul style="list-style-type: none">• Professional Building In Progress: <ul style="list-style-type: none">• Stroger Specialty Services



Impact 2020

Progress and Updates

Focus Area	Name	Status
Deliver High Quality Care	Implement operational improvements to improve access	<p>Completed:</p> <ul style="list-style-type: none">• Realignment/expansion of vacated Stroger Hospital space <p>In progress</p> <ul style="list-style-type: none">• Stroger Hospital space planning• Improve various throughput initiatives
Deliver High Quality Care	Implement operational improvements to improve access: expand evening and weekend hours at specialty care sites...and optimize times, locations and spectrum of specialty services available at CCH sites	<p>Completed:</p> <ul style="list-style-type: none">• Opening more appointment slots for CCH patients <p>In Progress:</p> <ul style="list-style-type: none">• Consideration of expansion of hours of operation.• Improve throughput



Impact 2020

Progress and Updates

Focus Area	Name	Status
Deliver High Quality Care	Implement leader rounding, safety huddles, standard training, unit-based problem solving	<p>Completed:</p> <ul style="list-style-type: none">• High Reliability safety huddles implemented• Rounding tools employed <p>In Progress:</p> <ul style="list-style-type: none">• Continuous refinement of the processes
Grow to Serve and Compete	Expand outpatient services available and improve scheduling and efficiency at outpatient sites	<p>Completed:</p> <p>In progress:</p> <ul style="list-style-type: none">• Continued implementation of patient kiosks• Expansion of evening and weekend hours• Improve throughput and productivity metrics



Impact 2020

Progress and Updates

Focus Area	Name	Status
Grow to Serve and Compete	Capture more CountyCare members as referrals by increasing internals for CCH specialty and inpatient care.	<p>Completed:</p> <p>In progress:</p> <ul style="list-style-type: none"> • Expansion of appointment slots • Expansion of specialty services (i.e. Bariatrics, Urology)
Foster Fiscal Stewardship	Utilize volume, unit costs and other data to routinely ensure staffing is in-line with appropriate industry standards.	<p>Completed:</p> <ul style="list-style-type: none"> • Implemented workforce development initiative from grant funded program <p>In progress:</p> <ul style="list-style-type: none"> • Implement productivity standards and key metrics to drive performance • Exploring improvement of services through community partnerships



FY2020-2022

The Future

Environmental Scan of Market, Best Practices and Trends



COOK COUNTY
HEALTH

Environmental Scan of Market, Best Practices and Trends

Observations

- Continued decline in hospital admissions, while increasing in ambulatory volumes
- Some volumes displaced to alternative sites (“Right care, Right time, Right place”)
- Expansion of uninsured due to changes at the Federal and State levels
- \$43 billion projected cut from Federal Medicaid DSH payments, 2018-2026
- Growth in consumerism
- Increasing focus on mitigating the impact of social determinants
- Increasing focus on excellence in patient experience
- Increased usage of technology and focuses on new technologies to deliver care
- Digital health on the rise
- Investment in capital with efficient capital planning
- Enhanced cultural competence



SWOT Analysis

Strengths, Weaknesses, Opportunities and Threats



COOK COUNTY
HEALTH

SWOT Analysis

Strengths

- Strong, clearly understood mission
- Comprehensive service delivery
- Quality specialty and diagnostic services
- Dedicated medical staff
- Improving clinic access
- Engaging committed staff
- Great reputation and stable workforce
- Capacity for growth
- Referral source for community agencies

Weaknesses

- Access to specialty and diagnostic services
- Recruitment & retention of staff
- Skills & abilities of some staff has variances
- Aging clinical equipment and lack of investment
- High cost structure
- Poor perception of patient experiences
- Quality ratings
- Lack of systems specific to healthcare operations
- Domestic utilization by CountyCare members below capacity

Opportunities

- Maximize space utilization
- Increasing enrollment base with CountyCare
- Teaching programs as source of future practitioners
- Leveraging experience working with populations with multiple complex conditions
- Collaboration between multiple services
- Improve patient experience
- Improve throughput
- Community partnerships
- Investment in infrastructure & technology

Threats

- Processes and implementation take too long
- Organization not nimble within environment
- Increasing uninsured population
- Competitive market for workforce
- Access to capital
- Inefficient processes and space
- Resistance to paradigm shifts
- Lack of interdisciplinary collaboration
- Hospital outpatient billing & reimbursement
- Sophisticated diagnostics require high skill workforce



FY2020-2022

Future Recommendations



Deliver High Quality Care

FY2020-2022 Strategic Planning Recommendations

- Improve operational efficiency
- Master facility planning
- Continue capital investment to expand services and improve efficiency
- Maximize access & expansion of services
- Improve patient experience
- Achieve quality and patient safety benchmarks
- Routine service line review of efficiency and effectiveness

Grow to Serve and Compete

FY2020-2022 Strategic Planning Recommendations

- Increase internal referrals of CountyCare members for CCH specialty and inpatient care
- Optimize use of eConsult
- Implement specialty service line offerings at community sites
- Promote services
- Define and establish five service lines as centers of excellence
- Improve productivity, efficiencies and throughput

Foster Fiscal Stewardship

FY2020-2022 Strategic Planning Recommendations

- Increase CountyCare domestic utilization
- Improve access for all patients
- Promote services to insured populations
- Improve service line efficiencies
- Improve throughput initiatives
- Align costs with clinical activity
- Improve revenue cycle
- Sustain movements towards value based payments

Invest in Resources

FY2020-2022 Strategic Planning Recommendations

- Continued investment in technology
- Continued investment in capital resources
- Align staffing models with clinical offerings

Leverage Valuable Assets

FY2020-2022 Strategic Planning Recommendations

- Create more meaningful community partnerships

Impact Social Determinants/Advocate for Patients

FY2020-2022 Strategic Planning Recommendations

- Strengthen links with community partners
- Improve synergies with internal care coordination

Thank you.



Appendices



Clinic F

Key Stats

Specialty Service Lines	FY 2016 Patient Volume	FY 2017 Patient Volume	FY 2018 Patient Volume	% Change FY 2017 to FY 2018
Amputee	190	185	225	21.6%
Cardiology	7,408	8,224	9,427	14.6%
Renal	6,789	6,040	6,811	12.7%
Gastroenterology	6,180	5,365	5,176	(3.5%)
Pulmonary/Chest/Asthma*	9,263^	7,552*	6,043*	(19.9%)
Minor Procedures	2,602*	2,311*	2,746*	18.8%
Total Patient Volumes	32,432	29,677*	30,428*	2.5%



Surgery Specialty Clinic

Patient Visits – 2017 & 2018

	FY 2017		
Service	Tot. Pat. Scheduled	Tot. Pat. Seen	Show percentage
Colorectal	5054	3617	71.57%
Cardiothoracic	643	678	105.44%
Surgery	4947	4582	92.62%
Trauma	129	142	110.08%
Urology	10571	8029	75.95%
Vascular	5034	4101	81.47%
Neurosurgery	2991	2289	76.53%
Total Surgery Specialty Clinic	29369	23438	79.81%

	FY 2018		
Service	Tot. Pat. Scheduled	Tot. Pat. Seen	Show percentage
Colorectal	4450	3302	74.20%
Cardiothoracic	899	846	94.10%
Surgery	4482	4020	89.69%
Trauma	625	1021	163.36%
Urology	9809	7070	72.08%
Vascular	5862	4421	75.42%
Neurosurgery	3081	2249	73.00%
Total Surgery Specialty Clinic	29208	22929	78.50%

Outpatient Service Lines

5 Year Projected Growth

Service Line	5 Yr Growth
Thoracic Surgery	33.89%
Endocrinology	33.46%
Urology	26.57%
Neurology	26.12%
Podiatry	25.23%
Orthopedics	21.71%
Pain Management	19.99%
Cosmetic Procedures	19.55%
Spine	19.07%
Vascular	19.02%
Gastroenterology	17.84%
Ophthalmology	17.77%
Nephrology	16.27%
Miscellaneous Services	16.15%
Pulmonology	14.93%
Lab	14.69%
Dermatology	13.73%
General Surgery	13.56%
Cardiology	12.83%
Neurosurgery	12.35%
ENT	11.79%
Evaluation and Management	10.58%
Physical Therapy/Rehabilitation	8.15%
Oncology	7.89%
Trauma	7.04%
Psychiatry	4.63%
Radiology	4.09%
Obstetrics	1.29%
Gynecology	0.17%



Radiology

Volumes – FY17 & FY18

Service Lines	FY 2017	FY 2018	Volume Variance
Inpatient	38,073	34,338	(3,735)
Outpatient	63,225	71,044	7,819
Emergency	104,906	99,749	(5,157)
Total Volume	206,204	205,131	(1,073)



Cardiology

Stats – 2017 & 2018

Cardiac Cath Lab			
FY	Diagnostic	PCI (Percutaneous Coronary Intervention)	Total
2017	829	241	1070
2018	926	218	1144

FY	TTE (Transthoracic Echocardiogram)	DSE (Dobutamine Stress Echocardiogram)	TSE (Treadmill Stress Echocardiogram)	TEE (Trans Esophageal Echocardiogram)	STRESS	HOLTER	TILT TEST	TOTAL
2017	3266	120	35	143	2080	788	1	6,433
2018	7163	177	146	323	2160	825	0	10794